



**PONY CLUB**  
QUEENSLAND

**PCQ PROBATIONARY  
Horse Trials' Technical Delegate Assessment Form**

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Name: \_\_\_\_\_ Club: \_\_\_\_\_

PCQ Membership Number: \_\_\_\_\_

Address: \_\_\_\_\_ Post Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_  Applicant must be Pony Club Official Showjump

Course Builder. **The applicant will submit the PCQ Technical Delegate Accreditation**

**Pathway form, signed by their Zone, to PCQ to start the probationary process.**

**Extract from Horse Trials Rule Book published 2019:**

The TECHNICAL DELEGATE will be responsible for inspecting the cross country courses prior to the event. It is up to the organisers to contact this person to arrange for an inspection of the course. The inspection to be in sufficient time to allow for any alterations to be carried out.

*For ODE TD applicants, it is required to assist a TD at 3 official events to be signed off. In regional areas, where assisting at events may be difficult (because of distance and/or frequency of events), exceptions to these Probationary TD requirements may be requested by the RDC. This request is ratified by the CIP and then it is presented to the sub-committee.*

The Technical Delegate will be present on the day of the Horse Trials:

- to ensure that they are conducted in accordance with the Rules;
- to act as technical delegate;
- to give what help and guidance may be required;
- to inspect and approve the cross-country and jumping courses before they are shown to the riders;
- to authorise appropriate alterations being made if, in his opinion, the courses are not in all respects within the limits laid down in the Rules or are unsuitable for the classes of horses expected to take part;
- to take responsibility for all decisions except where otherwise stated in the rules

**TD first assessment**

**for Event Date:**

**Venue:**

**Assessor's Name:**

**Signature:**

**Assessor's comments** \_\_\_\_\_

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**TD second assessment for Event**

**Date:**

**Venue:**

**Assessor's Name:**

**Signature:**

**Assessor's comments** \_\_\_\_\_

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**TD third assessment**

**for Event Date:**

**Venue:**

**Assessor's Name:**

**Signature:**

**Assessor's comments** \_\_\_\_\_

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