



Postal Address  
P.O. Box 293  
Northgate Qld. 4013

**PONY CLUB**  
QUEENSLAND

Phone: (07) 3216 1255  
E: [admin@ponyclub.com.au](mailto:admin@ponyclub.com.au)  
[www.ponyclubqld.com.au](http://www.ponyclubqld.com.au)

ABN: 49 040 247 044

## ZONE NOMINATION FORM FOR 2025 PCQ DISCIPLINE SUB-COMMITTEES

Closing Date: prior to any sub-committee meeting

The nominee must be a financial member of a club in the nominating zone and should be aware that they MAY be expected to attend Official Days held in their Zone as PCQ Steward of the appropriate discipline.

ZONE: ..... Nominates.....  
Please print name

Representative's postal address.....

Telephone: ( ) ..... work ( ) ..... home

Email.....

Of: ..... Pony Club.

As a member of the following PCQ Sub-Committee (please tick)

- |                |                       |                  |
|----------------|-----------------------|------------------|
| 1. Showjumping | 2. Jumping Equitation | 3. Horse Trials  |
| 4. Dressage    | 5. Combined Training  |                  |
| 6. Sporting    | 7. Campdraft          | 8. Mounted Games |
| 9. Tetrathlon  |                       |                  |

Signed..... *Secretary*

Signed..... *Nominee*

**Discipline sub-committees are declared vacant and all members must be re-nominated. As nominations are received the Sub-committee Chairs will be advised**

**Each Zone may nominate 1 delegate to each of the following discipline sub-committees:**

**Showjumping, Jumping Equitation, Horse Trials**

**Dressage, Combined Training**

**Sporting, Campdraft, Mounted Games**

**Tetrathlon**

**Zones will need to photocopy this nomination because one form is required for each person nominated.**