

Postal Address
PO Box 293
Northgate Qld. 4013



Phone (07) 3216 1255
E: admin@ponyclubqld.com.au
W: www.ponyclubqld.com.au

ABN: 49 040 247 044

2026 CLUB OFFICE BEARERS RETURN

2026 CLUB SECRETARY TO COMPLETE IN *FULL* AND RETURN

(a) within 7 days of the Club AGM, and

(b) within 7 days of any interim change of Office bearers (resubmit in full)

Club Name: _____ Club Pic: _____ Zone: _____

Club Email: _____

Club Postal Address: _____

Club President – (Cannot also hold the position of Treasurer)

NAME:

BLUE CARD NO#:

ADDRESS: Post code:.....

Contact NO#:

EMAIL:

Club Treasurer – (Cannot also hold the position of President)

NAME:

BLUE CARD NO#:

ADDRESS: Post code:.....

Contact NO#:

EMAIL:

Club Secretary

NAME:

BLUE CARD NO#:

ADDRESS: Post code:.....

Contact NO#:

EMAIL:

PTO

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Club Chief Instructor

NAME:

BLUE CARD NO#:

ADDRESS: Post code:.....

Contact NO#:

EMAIL:

Club Horse Welfare Officer

NAME:

BLUE CARD NO#:

ADDRESS: Post code:.....

Contact NO#:

EMAIL:

Club Sun Safety Officer

NAME:

BLUE CARD NO#:

ADDRESS: Post code:.....

Contact NO#:

EMAIL:

The information on this return accurately reflects the outcomes of the Club AGM

Date of Club Annual General Meeting:

Date set down to review Club Risk Management Policy:

Date set down to review Club Member Protection Policy:

Signed Date:
(Club Secretary)

NOTE: FOR COMPLETION OF THIS FORM:

Please attach a copy of the Minutes & Financials of the AGM & Club Risk Assessment to this report and return the originally signed form to PCQ.

Risk Assessment Checklist

CHECKLIST FOR CLUBS – Warning: this checklist is not exhaustive

Clubs affiliated with Pony Club Queensland should complete the following checklist and return a copy to PCQ each year with the Club Office Bearers Return.

If the answer to any of the questions is “no”, please provide details explaining the reason for non-compliance and the action and timeframe in place to remedy the non-compliance.

CLUB					
Number	Question	Answer		If answer is “no” is explanation attached?	
1	Is a copy of the following documents displayed in a place available to all members, riders, volunteers, instructors and staff? 1. Club Constitution or Rules 2. Club By-laws 3. Club Risk management Policy 4. Club Member Protection Policy in full 5. PCAQ Insurance summary for this year 6. Associations Incorporation Act and Regulations including Model Rules (all current) 7. Copies of OFT Annual return 8. Copies of PCAQ Annual return 9. Copies of AGM Minutes	Yes	No	Yes	No
		☐	☐	☐	☐
		☐	☐	☐	☐
		☐	☐	☐	☐
		☐	☐	☐	☐
		☐	☐	☐	☐
		☐	☐	☐	☐
		☐	☐	☐	☐
		☐	☐	☐	☐
		☐	☐	☐	☐
2	Has the club reviewed the following policies and made any recommended changes in the past twelve months? 1. Risk management Policy Date of review 2. Member Protection Policy Date of review 3. By-laws Date of review	Yes	No	Yes	No
		☐	☐	☐	☐
		/	/ 20		
		☐	☐	☐	☐
		/	/ 20		
		☐	☐	☐	☐
		/	/ 20		
3	Has the club complied with the policy in relation to Inspection and maintenance of facilities? Date of last inspection	Yes	No	Yes	No
		☐	☐	☐	☐
		/	/ 20		

4	Has the club complied with the policy in relation to the provision of food and beverages? Date of last inspection	Yes No ☐ ☐ / / 20	Yes No ☐ ☐
5	Is ready access to and from facilities available in the event of an emergency?	Yes No ☐ ☐	Yes No ☐ ☐
6	Does the club ensure that there is appropriate supervision and monitoring of the use of club facilities?	Yes No ☐ ☐	Yes No ☐ ☐
7	Has the club complied with the policy in relation to medical treatment, both in relation to skills and facilities?	Yes No ☐ ☐	Yes No ☐ ☐
8	Does the Club's Constitution adequately allow for the club to exercise disciplinary powers over its members Date of last review	Yes No ☐ ☐ / / 20	Yes No ☐ ☐
9	Do club premises comply with the minimum Workplace health and safety standards? Date of last review	Yes No ☐ ☐ / / 20	Yes No ☐ ☐
10	Does your club have top up liability insurance cover for non-pony club events	Yes No ☐ ☐	Yes No ☐ ☐
11	Has the club and its members complied with the Policy on defamation? Tick "no" if the club has received any complaints in this regard.	Yes No ☐ ☐	Yes No ☐ ☐
12	Has the club reviewed noise and lighting levels over the past twelve months to ensure they are not excessive? Date of last review	Yes No ☐ ☐ / / 20	Yes No ☐ ☐
13	Has the club complied with the policy on discrimination?	Yes No ☐ ☐	Yes No ☐ ☐
14	Has the club ensured that all members are notified to PCQ and are covered under PCQ's insurance?	Yes No ☐ ☐	Yes No ☐ ☐

15	Has the club considered the relevant rule book or manual when running an event or activity, regular or otherwise, for riders?	Yes ☐	No ☐	Yes ☐	No ☐
16	Is there a prohibition or monetary limit on expenditure incurred by club officers or others without formal approval?	Yes ☐	No ☐	Yes ☐	No ☐
17	Must all cheques bear two signatures?	Yes ☐	No ☐	Yes ☐	No ☐
18	Have up to date financial accounts been presented at each Management Committee Meeting during the last 12 months?	Yes ☐	No ☐	Yes ☐	No ☐
19	Has the Management Committee met during the last 12 months as and when required by the club constitution?	Yes ☐	No ☐	Yes ☐	No ☐
20	Was the AGM held within 3 months of the end of the Club's financial year?	Yes ☐	No ☐	Yes ☐	No ☐

SIGNATURE

Name of Person signing report	
Position in organisation	
Date	
Signature	