

PO Box 293, Northgate Q 4013
3/14 Ashtan Pl, Banyo Q 4014



T: 07 3216 1255
E: admin@ponyclubqld.com.au
W: www.ponyclubqld.com.au

Application for Open Days for 20_____

Open days are events that can include non-members of PCQ/PCA.

Checklist for holding an Open Day:

- ☐ **Club must hold one Official Event per Open Day**
- ☐ **Pre-approval signed** by Zone secretary.
- ☐ Form sent to PCQ at least **30 days prior to** the event.
- ☐ Program **must include** Competition rules, by laws and conditions of the event.
- ☐ Send Open Day Remittance form to PCQ within **14 days of** completion of the event.

Clubs are allowed to offer prize money at an Open Day.

Club: _____ Zone: _____

Contact Name: _____ Contact Phone: _____

Date of Last Official Event: _____ Discipline: Dressage / CT / ODE / JE / SJ / Tetrathlon / Sporting

Zone Approval: Date: _____ Signed: _____
Zone Secretary

Day #	Date	Venue	Type of Event
1.			
2.			
3.			

Minimum requirements for insurance purposes:

- All non-members must complete and sign the Day participant Event Waiver & Liability Declaration.
- Event is to be run under PCQ or PCA rules both general and competition
- All participants must comply with PCA Gear rules
- Judges or Officials should be PCQ instructors for gymkhana or from a suitably accredited Judge or Course Builder list for specific disciplines.
- Organisers must adhere to the PCQ Alcohol policy.
- Financial members of an affiliated PCQ club will be covered by all insurances providing ALL PCQ rules are adhered to.
- Non -members will be covered by **PCA Public Liability Insurance only**. There is no personal accident cover provided.

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Registered Day Participant Remittance Form 01 January 2027 – 31 December 2027

This form is to be completed and returned to Pony Club Queensland together with payment upon completion of the event. **This includes \$0 sum instances**

Cheques are to be made payable to The Pony Club Association of Queensland Inc.

Pony Club Name: _____

Date of Event: _____ Payment attached for: \$_____

Being for: _____ participants at \$20 each **per day**.

Please advise number of officials used on the day:

Coaches: _____ Officials: _____ Volunteers: _____

Please record details of non-member Day Participants:

First Name	Surname	Address	Date of Birth	Paid?

Signature: _____

Club Position: _____

Date: _____

Please return to Pony Club Queensland via email or post.

Payments to me made to:

Pony Club Association of Queensland Inc.

BSB 084-034

ACC 87-730-5062