

NATIONAL TETRATHLON 2003 APPLICATION PACKAGE



✓Accurately complete All Applicable forms

✓Please PRINT CLEARLY

For

Region _____

Please return all completed forms by **July 7th, 2003**

**Make all cheques payable to
"BC Islands Region Pony Club"**

Return entries to:

**Robin Taylor
C/O BC Islands Region Pony Club
3367 Drinkwater Rd.
Duncan, BC
V9L 5Z2**

Form 1 - Team Registration Form

To be completed by the Regional Representative:

If a 3-member team, then a ghost member will be added. *Indicate Team Captains

Team 1 MEN'S WOMEN'S

Chaperone: _____ Phone: _____ Email: _____

Coach: _____ Phone: _____ Email: _____

	NAME	AGE	PC Level	PHONE	EMAIL
SENIOR					
SENIOR					
JUNIOR					
JUNIOR					

Team 2 MEN'S WOMEN'S

Chaperone: _____ Phone: _____ Email: _____

Coach: _____ Phone: _____ Email: _____

	NAME	AGE	PC Level	PHONE	EMAIL
SENIOR					
SENIOR					
JUNIOR					
JUNIOR					

INDIVIDUALS MEN'S WOMEN'S

Chaperone: _____ Phone: _____ Email: _____

Coach: _____ Phone: _____ Email: _____

	NAME	AGE	PC Level	PHONE	EMAIL
SENIOR					
SENIOR					
JUNIOR					
JUNIOR					

*Note: if sending more than two teams, please photocopy page. _____

Entry Fee Summary – Cheque to be made payable to BC Islands Region PONY CLUB

Competitors: No. _____	X \$425.00 =	\$ _____
Coaches & Chaperones: No. _____	X \$375.00 =	\$ _____
Additional Banquet: No. _____	X \$ 30.00 =	\$ _____
Total Fees Submitted =		\$ _____

Form 2 - Competitor Arrivals and Departures

Please note: There are **TWO** Airports in the Region:

Nanaimo Airport: 40 minute drive *South* to Duncan

Victoria International Airport: 90 minute drive *North* to Duncan

Please circle appropriate Airport

Arrival at: **NANAIMO** or **VICTORIA INTERNATIONAL** Airport:

<u>Date</u>	<u>Time</u>	<u>Flight#/ Airline</u>	<u>Arriving From</u>	<u>Name</u>

Departure from: **NANAIMO** or **VICTORIA INTERNATIONAL** Airport:

<u>Date</u>	<u>Time</u>	<u>Flight#/ Airline</u>	<u>Arriving From</u>	<u>Name</u>

Every effort will be made to pick up and return those athletes traveling to Vancouver Island from outside the province, however, those participants arriving or departing at very early or late times (Midnight to 6:00 a.m.) may be asked to arrange for their own transportation.

Families or visitors are encouraged to make their own travel arrangements.

Form 3 - Coach and/or Chaperone Registration/ Profile

Name: _____ Coach Chaperone

Prov: _____ Health Card #: _____

Telephone Numbers: Home: _____ Work: _____

Email: _____ Fax: _____

Region: _____

Competitors Names: _____

Please indicate any allergies to food, medication or other special medical needs:

Please note: the organizing committee requests this for information purposes only.

Chaperones, coaches and competitors must assume responsibility for their own medical needs.

Comments: any questions or special requests? _____

Are you a vegetarian? YES NO

VOLUNTEER JOBS:

Are you able to jump judge cross-country? YES NO

Are you able to time swimming? YES NO

Are you able to time running? YES NO

Other Jobs: _____

Chaperone/ Coach Signature: _____

Date: _____

Form 4 - Competitor Registration/ Profile (2 pages)

Name: _____

Chaperone: _____

Region: _____

(circle one)

Senior Girl: Junior Girl: Girls Team: _____

Senior Boy: Junior Boy: Boys Team: _____

Address: _____ City: _____

Postal Code: _____ Prov: _____

Health Card #: _____

Telephone Numbers: Home: _____ Work: _____

Email: _____ Fax: _____

Date of Birth: (dd/mm/yyyy) (day)(month)(year)

Weight: _____ Height: _____

Please indicate any allergies to food, medication or other special medical needs:

Please note: the organizing committee requests this for information purposes only. Chaperones, coaches and competitors must assume responsibility for their own medical needs.

Comments: any questions or special requests? _____

Are you a vegetarian? YES NO

Riding: Pony Club Level: _____ Date Attained: _____

Note: Juniors must have a minimum of DI and should be capable of riding a pre-training course. (Max. 2'9" (.85 meters)

Seniors must have a minimum level of C and should be capable of riding a training level course. (Max. 3'3" (1.0 meters)

Swimming: Best Timed Event: 200 metres: _____

Running: Best timed Event: 2 k:m. _____

Previous Competition Experience:

Include the number and level of horse trials, mounted Pony Club Rallies and Tetrathlon competitions:

Are you bringing a horse? YES NO (If yes, complete the *Horse Profile Form*)

Describe (in detail) the type of horse you are familiar with. Size, type, aggressiveness, confidence, level of experience: _____

How many *different* horses have you ridden in competition? _____

In what disciplines and levels have you competed? _____

What other types of activities are you involved in? _____

Competitor's Signature: _____ Date: _____

If competitor is under the age of 18 Parent/ Guardian must also sign.

Parent/ Guardian Name: (please print)

Parent/Guardian Signature: _____ Date: _____

Coach's Signature:

I, _____ certify that this member has schooled Cross Country and is capable of riding competently at the above level.

Coach's Signature: _____ Date: _____

Form 5 - Individual Participant's Personal Conduct Letter

I, _____, have been selected to represent my region and compete at the National Tetrathlon 2003 Championship. I understand that as an ambassador for my region, and as a participant in a Pony Club activity, I am expected to behave in accordance with the rules of Canadian Pony Club and to meet the high expectations of the Canadian Pony Club.

I will conscientiously endeavour to co-operate with my coach and chaperones, and with the organizers of the competition so as to represent my region as a worthy ambassador. I understand that I am a guest of BC Islands Region, and that I participate in this competition on the provision that I conduct myself in a manner that will retain the approval of the organizing committee.

I further understand that if there is a serious breach of behaviour, the organizing committee at its sole discretion, may remove me from the competition and send me home, and I or my parents understand that any costs incurred in this regard will be my or their responsibility.

Competitor's Name: (please print)

Competitor's Signature: _____

Date: _____

(if under 18 years of age)

Parent/Guardian Signature: _____

Date: _____

I, _____, the District Commissioner of the _____ Branch of the Canadian Pony Club, do hereby confirm that _____ has attained Pony Club Test Level _____, is a member in good standing of the Branch, has signed the Canadian Pony Club Acceptance of Risk Form, and is eligible under Canadian Pony Club rules to compete in this National Competition.

District Commissioner Name: (please print)

Signature: _____ Date: _____

Regional Tetrathlon Chair: _____ Date: _____

Note: Entries without the DC's & Regional Tetrathlon Chair guarantee will not be accepted.

Form 6 - Waiver of Liability - Coaches, Chaperones, Competitors

Full Name:	Date of Birth: (dd/mm/yyyy)
Address:	City:
Province:	Postal Code:
Phone Number:	Health Card Number:

Emergency Contact:	Phone Number:
Address:	City:
Province:	Postal Code:

Headgear And Vest Policy:

*It is MANDATORY that all riders wear properly fitted protective head gear approved by ASTM/SEI/BSI at all times while mounted. It is STRONGLY RECOMMENDED that all riders wear protective eventing vests for both Stadium and Cross Country. The parent/guardian is responsible for the condition and suitability of headgear. Event organizers are not responsible for the headgear, but will inspect all headgear for an approved sticker, and have the right to eliminate or disqualify competitors for unsuitable headgear, according to the National Tetrathlon Rules 2001 (Revised 2003). Medical Arm bands **must** be worn at all times, while mounted, on the left arm.*

I, _____, realize that there are inherent dangers involved in sporting activities, and that jumping horses in particular is a high-risk sport. Furthermore, I realize that there are inherent risks in caring for horses, competitive running, swimming and air pistol shooting. In consideration of being allowed to participate in this competition as a competitor, coach or chaperone, I agree to assume all risk and responsibility for the safety of my property, my horse(s) and myself. I agree to be bound by the rules of the Canadian Pony Club Tetrathlon, and hereby agree to release, make no claim against and hold harmless the organizing committee members, Pony Club volunteers, officials, spectators, facility owners, agents and staff for any accident, loss, damage, injury or illness.

My parents/guardians and I understand the above conditions and agree that I am participating at my own risk.

Name: (please print) _____

Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Form 7/8 - Horse/Pony Profile

Owner's Name: _____

Address: _____ City: _____
Prov: _____ Postal Code: _____

Telephone Numbers: Home: _____ Work: _____ Cell: _____

Email: _____ Fax: _____

Horse Name: _____ Age: _____

Breed: _____ Sex: _____

Please complete this form accurately so that horses can best be matched with riders as much as possible prior to the commencement of the competition.

1. Provide details of horses jumping skills and style. Include show jumping, hunter competitions and specify height, and type of obstacles the horse normally faces. Specify any major difficulties.

2. Describe the nature of your horse's character under saddle. For instance is the horse bold, forward, tentative, quiet, green or seasoned? Does it need to be driven or held back? Does your horse become strong and difficult to hold back? Are they an honest jumper?

3. What advise would you give to someone new competing on your horse?

4. Other important details: Ground Manners etc.

Form 7/8 - Horse/Pony Profile...Cont.

Owner's Signature: _____ Date: _____

If Owner is under 18 years of age:

Parent/ Guardian Signature: _____ Date: _____

Horse/Pony Waiver

Horse/ Pony Name: (please print) _____

I, _____, owner of the above named horse/pony, realize that there are inherent dangers involved in sporting activities and that jumping in particular is a high-risk sport. I further acknowledge the inherent risk in riding and working around horses, which risks include bodily injury to both horse and rider, which can result in normal use, competition or schooling. I agree to assume all risk and responsibility for the safety of my horse(s). I thereby release and absolve The Canadian Pony Club, the National Tetrathlon Committee, the coaches, the organizers of Tetrathlon 2003, the property owners, grooms, competitors and volunteers helping to run this competition from all responsibility, liability of claims of any kind which I may have arising from National Tetrathlon 2003 Competition, including but not limited to bodily injury or death to my horse(s) and damage to my property arising from any cause whatever.

(To be signed by the owner of the horse, or parent if the owner is under 18 years.)

Owner's Name: (please print) _____

Owner's Signature

Witness Signature

Date

Date

Form 9 - Horse/Pony Equipment

Owner's Name: _____

Horse/Pony Name: _____

Horses will be stabled at Michael Lake Cross Country Course, Ladysmith, BC., in outdoor wood rail paddocks, in a forested campsite.

Bedding and emergency hay will be provided. We suggest you bring your own hay, to maintain consistency for your horse's health.

Each horse must have its own individually packaged grain or supplement rations, dated and labeled with each horse's name. Remember that other individuals will be feeding and caring for your horse along with many other horses. It is in your horse's best interest that you make the care of your horse as easy as possible for these volunteers.

You must complete the HORSE/PONY IDENTIFICATION CHART:

This form is to be stapled to your horses box stall.

Please indicate what equipment accompanies each horse. Describe if possible.

Item	Description
Saddle	
Saddle Pad - colour, etc	
Girth – type/ size	
Bridle – type/ bit	
Martingale*	
Breastplate*	
Overgirth*	
Protective Boots*	
Studs and Stud Kit*	
Cotton or anti-sweat sheet	
Stable Wraps	
Water Bucket – colour/ size/ type	
Feed Bucket(s) – number/ colour/ size/ type	
Halter – colour/ material i.e. leather	
Lead Shank – colour/ material	
Grooming Kit – list items	
Other Items - list	

*Include this equipment only if it is normally used for your horse
Please label items where possible to avoid any mix up in equipment.

Bagged Feed: YES NO

Form 10 - Horse/Pony Paddock Identification Chart

Horse/ Pony Name: _____

Breed or Type: _____ Age: _____ Sex: _____ Height: _____

Riders: _____

Owner's Name: _____

Address: _____

City: _____ Prov: _____ Postal Code: _____

Telephone Numbers: **Home:** _____ **Work:** _____ **Cell:** _____

Email: _____ Fax: _____

Colour and markings of horse:

Colour	
Face markings	
Body markings	
Leg markings	

Stable Vices:	
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Feed And Schedule:

Time	Roughage	Concentrates
Morning		
Noon		
Evening		
Late Night?		

Special Requests or special care needed for this horse:

Form 11 - MLXC Affidavit

For MLXC activities (with the exception of Michael Lake HT), a Coggins Test for your horse will not be required IF your horse has remained within the lower mainland and Vancouver Island in the last year. We respectfully request that this affidavit be completed, signed and dated by the LEGAL Owner of the horse and Owner's Legal guardian, if the Owner is a junior, 18 years or under.

Please note: All other B.C. & Out of Province horses will be required to provide proof of a Negative Coggins Test.

Affidavit

In consideration of Michael Lake X Country (MLXC) permitting my participation in any equine activities at MLXC, 13270 Doole Road, Ladysmith, B.C.,

I, _____,

as the Legal Owner of the Horse known as _____,

and ridden by _____, warrant that in the last 12 months this horse has remained within the lower mainland and Vancouver Island of British Columbia.

It is understood that I, as the Legal Owner of the Horse, will accept any liability directly resulting from mis-information given in the document.

Signature of Legal Horse Owner

Date

Signature of Legal Guardian, if Owner 18 years or under

Date

Witness

Date