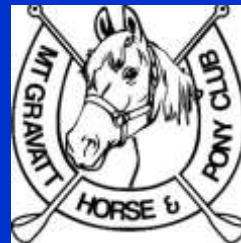


60th
Anniversary

Mt Gravatt OpenGymkhana



SUNDAY 2ND AUGUST 2020 AT 8:00 AM

HOSTED BY MT GRAVATT DISTRICT HORSE & PONY CLUB

475 Priestdale Road, Rochedale PIC Number: QABB1858

Event Day Entrance via 915 Rochedale Rd, Rochedale

Nominations on or before Wednesday 28th July: \$25 PCQ Members \$35 Non-PCQ*
Nominations taken on the Day: \$30 / \$40*
*(*Includes First Aid Levy @ \$5 per rider)*

(Open to all PCQ Members & Open Riders)**

HORSE HEALTH & Participant DECLARATION FORMS & PARTICIPANTS WAIVER FORMSMUST BE HANDED IN ON THE MORNING OF EVENT TO RECEIVE THE RIDER NUMBER**

All nominations and enquiries to: secretary.mgdhpc@gmail.com

Contact: Tracey O'Malley – 0438 417 302 or Maree Forrest – 0438 716 975

Please bring your own Water for Wash Downs



EVENTS

Rider Class • All Round Pony Club Mount •
Show Jumping Top Score •
Drum & Peg • Keyhole • Running T •
Bounce Pony • Bending • Barrels

AGE GROUPS

8yrs & Under Assisted/Unassisted •
9 – 10yrs • 11 – 12yrs • 13 – 14yrs •
15 – 16yrs • 17 – 26yrs • Seniors

AWARDS

Ribbons to 4th in all events
Overall Trophies to 3rd per age group
Rug to Highest Overall Points Winner
Saddle Cloth to Runner-Up Overall Points Winner

Canteen available * subject to any Covid-19 requirements

RULES

1. All gear must be PCQ approved, a list of approved items can be found here <https://ponyclubqld.com.au/wp-content/uploads/2020/01/2020-Saddlery-and-Gear-Check-Book.pdf>
2. NO Smoking on the Pony Club Grounds.
3. NO dogs permitted on the club grounds
4. **NO Rider is permitted to have their phone on them while mounted. If you are seen with your phone on you while mounted you will be eliminated for the day.**
5. All events will be run as per the rules in the 2020 PCQ RULE BOOK unless otherwise stated.
6. All Non-PCQ Riders to wear Collared, Sun-safe Sleeved Shirts; PCQ Members may wear Club Muster, or Formal Uniform.
7. Judges Decision is final.
8. One Horse / Rider rule applies
9. No additions or deletions of equipment or leaving the arena between Rider Class & Pony Club Mount.
10. Riders must not leave the groups until after rider class unless permission given from the CHIEF STEWARD – Maree Forrest
11. Competitors may be asked to produce proof of 2020 PCQ Riding Membership.
12. Horses must be ridden at a walk at all times when not competing, this includes in the car park areas.
13. DISPUTES: all complaints should be made to the chief steward. Disputes committee will adjudicate accordingly. The complaint must be lodged in writing within 30 minutes & be accompanied by a fee of \$50.
14. By nominating for this Event competitors agree to allow Mt Gravatt to use any photos taken of them at the event for promotional, marketing and social media purposes.
15. Refunds may be allowed up to midnight Friday prior to competition date. Refunds on the day will require an accompanying medical/vet certificate.
16. If any Covid-19 Restrictions apply at the time of the event, Numbers may be capped per class

DISCLAIMER

Neither the organising committee of any contest to which these rules apply, nor the PCQ accept any liability for any accident, damage, injury or illness to horses, owners, riders, ground spectators or any other person or property whatsoever.

RESERVATION OF RIGHTS

The organising committee reserve the right to:

- cancel any class or event
- divide any class
- alter the advertised times
- refuse any entry, with or without stating the reason
- transfer competitors between sections of a class
- combine a class if less than 3 competitors



BIOSECURITY

In the event of horse movement restrictions, each participant will be responsible for the care, maintenance and cost of their horse/horses. Including and not limited to feeding, watering and vet costs for the time of the restrictions.

Nomination Form – Mt Gravatt 60th Anniversary Gymkhana

Rider / Helper Name, Contact Mob & Email Address	D.O.B	Horse Name	Age Group	PCQ Membership #	PIC #	Nomination Fee

Account Name: MGDHPC Nomination Acc BSB 084-129 Acc# 127749078
 NB: Please use Riders Full Name & Club (if applicable) as the Reference



Horse and Participant Health Declaration

Full name (owner/person in attendance)

Address of above

Email Mobile/Phonenumber

Property of Origin (if different)

PIC Number from property

PIC Number of destination QABB1858 MT GRAVATT

Official Horse Name (nominated name)	Breed	Description/Sex	Brand/Microchip	Hendra Vacc Date Y/N

If stabling overnight, please state inclusive dates: _ / _ / _ to / / _

Declaration by owner or person in charge of horse/s

I declare that the horse/s named above has/have been in good health, eating normally and not showing signs of illness during the last 3 days leading up to attendance to this event today. I give my authorisation for the designated steward to call for veterinary inspection of the horse/s named above and, in my care, should they be showing signs of illness at any time during the course of the event. I agree to pay any veterinary fees incurred as a result of this.

I AGREE TO ENSURE THAT:

1. If required before movement, all horses will be shampooed, rinsed and allowed to dry, and their hooves will be picked clean of all solid material and washed with shampoo.
2. All vehicles and equipment accompanying the horses will be in a clean condition at the start of travel to the event.
3. The information contained in this Horse Health Declaration is true and correct to the best of my knowledge
4. I agree to abide by all conditions and directions of the Organising Committee
5. I acknowledge that failure to comply with the above may result in refusal of entry to the venue; disqualification or other Disciplinary action as decided by Pony Club Association of Queensland or the event organising committee.
6. In the event of horse movement restrictions, each participant will be responsible for the care, maintenance and cost of their horse/s including feeding and watering.

Full Name:	Yes	No
Club:		
Temperature: (Normal range 36.1° C – 37.5° C)		
Have you returned from or been in contact with anyone returning from overseas within the last 14 days		
Have you any Flu like symptoms		
Have you been self-isolating or quarantined in the past 14 days		
Have you downloaded the COVID safe app.		

_____ Signature _____ Name _____ Date