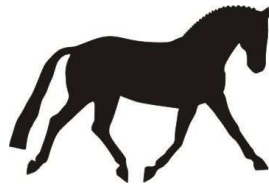




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**KYABRAM PONY CLUB Inc.**

Registered Association No: A0004876K

## **Dressage and Showjumping Day**

**Kyabram showgrounds, 22nd September 2019**

**Dressage: PONY CLUB and OPEN Grade 1 to 6 (Grade 1 & 2 will be a combined classes)**

**Showjumping: B – F (B will be a combined class)**

**PCAV Rules Apply**

**Entries close 15<sup>th</sup> September 2019 - online at [www.ponyclub.kyabram.biz](http://www.ponyclub.kyabram.biz)**

Entry Fees:	Pony Club Members	\$30.00 each discipline (\$50 for both)
	Open Riders	\$40.00 for each Discipline (\$70.00 for both) (additional \$15.00 Day Participant Fee if Applicable)

**Prizes Pony Club: Ribbon to 4<sup>th</sup> & Sash and prize for the overall winner in the Dressage Jackpot and winner of Show Jumping Jackpot in each grade.**

**Prizes Open: Ribbons to 4<sup>th</sup>. Sash and prize for overall winner in the Dressage Jackpot and winner of Show Jumping Jackpot in each grade.**

**No equal placings, PCV countback rules for dressage and countback on top score for Showjumping.**

**Dressage Tests - 2013 PCAV tests**

**Grade 1 Tests B&D, Grade 2 Tests B&D, Grade 3 Tests B&D, Grade 4 Tests B&D, Grade 5 Tests B&D**

**Grade 6 Test 6A & 6A.**

*(Riders will be limited to two horse for dressage).*

**Show Jumping:** Event 1 – Table A Against the clock    Event 2 – Top Score – Article 270 12.1

**For all grades: A , B, C, D, E & F Showjumping will commence after the completion of Dressage tests, times will be published on Thursday prior to event.**

**\*\*\*Canteen facilities available all day\*\*\***

**The draw will be available on the Thursday prior to the competition via email and our website**

**[www.ponyclub.kyabram.biz](http://www.ponyclub.kyabram.biz)**

Please bring vet and medical forms and day participant form with you on the day for easy check in.

Forms will be available on the day if required.

**ENQUIRIES TO: Bev Parsons 0428 522 998 or Email: [bev\\_parsons@dodo.com.au](mailto:bev_parsons@dodo.com.au)**

# Show Jumping

## Heights and rules as per PCAV Show jumping rules 1st January 2017

Grade	No of Obstacles	Minimum Starting Height	Maximum Starting Height	Maximum Finishing Height	Maximum Spread	Spread Meters Per Minute
A	9 To 12	1.00	1.10	1.25	1.35	350
B	9 To 12	0.90	1.00	1.15	1.20	325
C	9 To 12	0.75	0.85	1.00	1.05	300
D	8 To 10	0.60	0.70	0.85	0.85	275
E	8 to 10	0.45	0.55	0.70	0.70	250
F	6 to 10	0.35	0.45	0.55	0.55	250

### **ONE ROUND Against the clock**

#### **ARTICLE 238.2.2**

This is a competition against the clock, but in the event of equality of Penalties for first place, there will be one jump off against the clock. Other Athletes are placed according to their Penalties and time in the first round.

**(Please Note: The judge may choose to run this as “an optimum” time event rather than against the clock)**

### **TOP SCORE**

#### **ARTICLE 270 12.1**

An article may be provided as part of the course, duly marked by flags and titled “Joker”. The Joker may be jumped twice; 200 points are awarded each time this obstacles is jumped correctly, but if knocked down, 200 points must be deducted from the total points obtained so far by the athlete.



### **CONDITIONS OF ENTRY:**

**Competitors please read prior to completing Entry Form, entry form is an acceptance of these conditions.**

1. **Entry is conditional upon acceptance of these conditions.**
2. **Entering this competition constitutes acknowledgement that PCAV rules apply and acceptance of these rules.**
3. **Correct 'standards' numbered helmets must be worn as specified in PCAV Gear Rules. Spot checks may occur and incorrect helmet will mean elimination.**
4. **Competitor numbers- Organising committee will pre-allocate and advise numbers. Competitors need to supply own Saddle or Bridle numbers which must be displayed on BOTH sides.**
5. **Gear Check :** All Competitors MUST present 20 minutes prior to their first dressage test. If there is no change in gear you do not have to gear check for the second dressage test. All competitors must represent for a gear check prior to the show jumping phase.
6. Competitors should be prepared to be called earlier than scheduled.
7. Horses must be at least age four; no stallions, colts or rigs.
8. Competitors may ride more than one horse, subject to the conditions of PCAV *Handbook of By-Laws* multiple horse rules.
9. Queries, protests, horse abuse rules as per PCAV *Handbook of By-laws*.
10. **NO dogs allowed on the Grounds please leave them at home.**
11. The organising committee reserves the right to cancel any class or competition; divide any class; alter times; refuse any entry with or without stating the reason.
12. Neither the organising committee of this competition, nor PCAV or anyone acting on their behalf, accept any responsibility whatsoever for any accident, damage, injury or illness to horses, riders, ground spectators or any other person, horse or property.
13. Lunging in round yard only.
14. Open Riders
  - a. Everybody fills in the Liability Declaration Form
  - b. \$15 Day Attendance Fee is due **UNLESS** you are a financial member\* of EV/EA; AHS; SHCA; AERA; an Interstate Pony Club; or can prove personal Liability Cover of at least \$10,000,000. **\*Must produce proof.**
  - c. Riders without adequate Insurance Cover pay \$15 for Liability Only cover for the duration of the event. (Not personal Medical) and complete the Day Participant Waiver.
15. PCAV club member cards must be inspected at the secretary's office.
16. PCAV Insurance Policy specifically states anyone not following PCAV Rules may be left uninsured.
17. No refunds after close of entry except with vet or medical certificate, however an admin fee of \$10 will be withheld.

### **All participants are required to fill out and bring the following forms on the day of the event**

- a) Day Participation Form  
<http://ponyvic.omnisportsmanagement.com/Portals/231/Forms/Day%20Participation%20Waiver%20and%20Declaration.pdf?ver=2019-07-04-001939-393>
- b) Medical Response Authority
- c) Horse Veterinary Authority



Inc AS13413S | ABN: 64 320 020 091

**Kyabram Pony Club – Showjumping and Dressage Day**  
**Kyabram Showgrounds, KYABRAM.**

**MEDICAL RESPONSE AUTHORITY**

The Medical & Horse/Veterinary Authority is a compulsory form and must be sent with your entry form

**RIDER DETAILS:**

Name of Rider:		Date of Birth:	
Address of Rider:			
Town/Suburb:		Postcode:	
Phone (H):		Mobile:	
Email:			
Ambulance Cover	<input type="checkbox"/> NO <input type="checkbox"/> YES    Ambulance Number:		

**MEDICAL RESPONSE AUTHORITY**

Please complete the following section *if rider is Under 18 years*. Organisers suggest that all competitors complete this section.

Parent/Guardian Name/Emergency Contact: .....

Address: ..... Postcode: .....

Phone (h): ..... Mobile: .....

Email: .....

I, ..... being the parent/guardian named above or, if no person is named being the competitor aged 18 years or over, give permission for the competitor named above to receive FIRST AID and/or MEDICAL TREATMENT, and being transferred to hospital by ambulance should the need arise during the conduct of the **Showjumping and Dressage Day** held at **Kyabram Showgrounds** on the **22 September, 2019**. I give the President of the **Kyabram Pony Club**, or their appointed deputy, my consent to authorize such transfer and to make such emergency medical arrangements as may be deemed necessary by a qualified medical practitioner on my behalf. Before taking this action, the President of **Kyabram Pony Club**, or the appointed deputy, must be satisfied that every possible practical effort has been made to contact the accompanying parent/Guardian/Emergency Contact named above. I give authority in the full knowledge that I will be required to pay costs incurred if insurance held by the **Kyabram Pony Club** does not cover the ambulance transfer, medical treatment or any other costs involved.

Rider's Parent/Guardian Signature/Emergency Contact Signature: .....

Print Name: ..... Date: .....



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# Kyabram Pony Club – Showjumping and Dressage Day

## Kyabram Showgrounds, KYABRAM.

### HORSE/VETERINARY AUTHORITY

The Medical & Horse/Veterinary Authority is a compulsory form and must be sent with your Event Entry Form.

RIDER NAME: .....

#### HORSE DETAILS:

Registered name of horse and / or name as officially entered:	
Address of property from which the horse will be moved to the event Or PIC No:	
Address of property to where the horse will move after the event Or PIC No:	

I, ..... being the owner/lessee of the above named horse, hereby consent to the Official Veterinary Officer providing such treatment as is deemed necessary to this horse in the case of an accident at the **Showjumping and Dressage Day** held at **Kyabram Showgrounds** on the **22 September, 2019**. I agree to be fully responsible for all service or consultation fees charged as a result of such accident. In a case where it is deemed by the Official Veterinary Officer that on humanitarian grounds the above named horse should be destroyed because of illness, injury or accident, I hereby give the Official Veterinary Officer and the President of **Kyabram Pony Club**, or the appointed deputy, permission to act in accordance with the recommendation of the Official Veterinary Officer in this matter. Before taking this action the President of the **Club**, or the appointed deputy, must be satisfied that every possible practical effort has been made to contact the accompanying parent/guardian/responsible adult named above. I list below any special conditions or instructions as to the disposal of the horse after such action by the Official Veterinary Officer.

#### Health of Horse(s)

I declare that the horse named above will be in good health, eating normally and not showing signs of respiratory disease during the last 3 days leading up to this event. I give my authorisation for the Event Secretary to call for veterinary inspection of the horse/(s) named above and in my care should they be showing signs of a respiratory illness at any time during the course of the event. I agree to pay any veterinary fees incurred as a result of this veterinary examination.

Rider Signature: ..... Date: .....

Rider's parent/Guardian Signature: ..... Date: .....

#### Horse Event Declaration Waiver

I understand that due to diseases such as equine influenza, the Victorian Department of Primary Industries, or other State or Commonwealth government body, may restrict or prevent the movement of horses, vehicles and personnel for a period of time ("Standstill"). I acknowledge and agree that a Standstill is a risk of competing at this event and I agree to pay all costs or expenses incurred for my horse by **Kyabram Pony Club** as a result of a Standstill.

#### CONDITION OF ENTRY

I hereby agree to abide by the conditions and rules as specified by the PCAV and the Organising Committee for the **Showjumping and Dressage Day**. Failure to comply with the conditions of entry may result in disqualifications

Rider/Guardian Signature: ..... Date: .....