

B Test

Nomination Form - *To be returned to your Area Representative*



CANDIDATE INFORMATION:

Name: _____

Branch / Centre: _____

Address: _____

Postcode: _____

Telephone: _____ **Mobile:** _____

Email: _____

Date of Birth: _____

Date of previous B Test: _____

Age on 1st January of the current year: _____

I wish to nominate the above Candidate for (please tick):

☐ The B Test ☐ The B Test (Riding) ☐ The B Test (Horse and Pony Care)

I hereby certify that:

- The Candidate will receive training in the subjects required and will prepare for this Test.
- I understand that the Candidate may have to change horses and another Candidate will ride the Candidate's horse.
- I understand that the horse brought to the Test may be suitable for all parts of the Test.

IMPORTANT INFORMATION:

- In the event of a Candidate failing the Test a new nomination form must be submitted together with a further fee.
- Please refer to the Reasonable Adjustment policy, found in the Rules of The Pony Club, available on The Pony Club Website.

Last updated January 2025

I enclose the nomination fee as laid down in the current Pony Club Handbook/website.

Signed: _____ **Date:** _____
(Candidate or Parent /Guardian if Candidate is under the age of 18)

Signed: _____ **Date:** _____
(District Commissioner / Centre Proprietor)

Signed: _____ **Date:** _____
(Area Representative)

NB *If you are unable to get the above signatures, a supporting e-mail from you Area Representative or DC for this nomination will be accepted.*

Please note: This form works best on desktop or laptop computers. For mobile use, please download the free Adobe Acrobat Reader app for full functionality. *Thank you!*