

2024 WESTERN ONTARIO PONY CLUB REGIONAL TETRATHLON & SHOW JUMPING ENTRY FORM page 1 of 3

Pony Club Branch:								
Rider's Name:			Date o	of Birth (m/	′d/yy):			
CPC Testing level:	Show Jumping Division: (please check one)							
Horsemaster?	X- Rail	0.6m	0.7m	0.75m	0.85m	0.9m	1.0m	1
National Qualifier Division for Show Jum	ping: Y	ES NO						
Name of horse or pony:				Age o	of horse or	pony:		
Tetrathlon								
Tet Division:				g division is It a lower h		•	•	for
Participant will have their own gun:	YES	NO	Participa	nt needs to	borrow a	gun:	YES	NO
Sharing a gun with other member:	YES NO	Name o	fother pa	irticipant sl	naring gun	:		

Entry Fee for Show Jump ONLY (3 classes)	\$90				
Entry Fee for Tetrathlon DAY 1 ONLY (includes swim, shoot, run)	\$75	Includes a \$10 non-refundable admin fee		admin fee	
Entry Fee for Tetrathlon & Show Jump (1 st round of show jump counts towards Tet final score)	\$160				
Refundable Number Deposit	\$5	Per day (\$10 for Sat & Sun)			
Stabling fee per Night	\$30	20x100' runs with run in shelter. (can be shared) Please use straw & bring your own buckets.			
Straw request per bale	\$7	Straw can be provided. Shelter is 3 sided 10' x 10' attached to run			
Camping on site (no hook ups)	No Fee	Please indicate size of camper/tent/rig			
			Total:		

Please make your cheque payable to YOUR PC Branch

(One branch payment to be submitted to Western Ontario Region for the total of all branch entries.)



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Parent Volunteer Registration

Most duties require a commitment of 2 hours. Events cannot run without the support of volunteers 🙂

Each competitor MUST have a volunteer listed on this entry form for each day their child competes

TETRATHLON DAY (SATURDAY Jun 29 , 2024)

From the Tetrathlon Volunteer Job Description sheet, select 2 duties in your order of preference.

Volunteer Name:								
Cell phone # for day of show:	Email:							
1 st Choice	2 nd Choice:							
No Preference:								
SHOW JUMP DAY (SUNDAY Jun 30, 2024)								
From the Show Jumping Volun	teer Job Description sheet, select 2 dutie	s in your order of preference.						
Volunteer Name:								
Cell phone # for day of show:	Email:							
1 st Choice	2 nd Choice:							

No Preference:



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Parental / Club Sign-offs

Parental Consent:

I certify that I have reviewed the Parent Information page and agree to ______participating in the Regional Show Jumping and/or Tetrathlon

Signature of Rider

Signature of Parent or Guardian (If participant is under 18)

District Commissioner / Branch Approval

I certify that _______ is qualified to compete at the level, has completed shooting range training and is safe and able to swim independently (tet entries only) and is member in good standing of Pony Club.

Signature of Branch Show Jump Rep (if entering Show Jumping)

Signature of Branch Tet Rep (if entering Tetrathlon)

Name of Rep

Name of Rep

Signature of Club DC

Phone