

## **B Test Nomination Form**

## **CANDIDATE INFORMATION:** Name: Branch / Centre: Address: Post code: Telephone: Mobile: Email: Date of Birth: \_\_\_\_\_ Age on 1st January of the current year: \_\_\_\_ Date of previous B Test(s): 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. If unsuccessful, a Candidate may not re-take any failed section(s) until a minimum of six weeks has elapsed after their unsuccessful attempt. • Please refer to the Reasonable Adjustment policy, found in the Rules of The Pony Club, available on The Pony Club Website. I enclose the nomination fee as laid down in the current Pony Club Year Book/website Signed: (Candidate or Parent /Guardian if Candidate is under the age of 18) I hereby certify that: • The Candidate is at least 14 years old (the Recommended minimum age is 15). • The Candidate is of a standard that it is reasonable that they are put forward for this Test.

Date:

Signed: (District Commissioner / Centre Proprietor)