



USPC

The United States Pony Clubs, Inc.

The Kentucky Horse Park, 4041 Iron Works Parkway, Lexington, KY 40511
859/254-7669 (PONY) Fax 859/233-4652 email: testing@ponyclub.org

Rating Requested

- H-B \$150 C-3 \$175
- B \$200 H \$250
- H-A \$250 A \$225

Specialty Ratings:

- C-3DR \$175 C-3SJ \$175
- B-DR \$200 B-SJ \$200
- A-DR \$225 A-SJ \$225

CANDIDATE APPLICATION

PLEASE NOTE:

Applications **must** be postmarked by the following dates:
Tests held between January and May 31st: **January 15th or 8 weeks prior to the test date, whichever is earlier.**

Tests held between June and October 31st: **April 15th**
Tests held in November and December: **8 weeks prior to the test date, as stated on the National Testing Schedule**

There is a **\$50** fee for changing site.

\$50 will be deducted from refund for cancellation before deadline; No refunds will be given after deadline.

RS Checklist

- RS Signature
- DC Signature
- Parent Signature
- Candidate Signature
- 3 Test Choices Marked
- Original Medical Release
- Club Check
- First Aid Card (H/H-A Only)

Last Name _____ First Name _____ Birth Date _____

Mailing Address _____

City/State/Zip _____

Daytime Phone Number _____ E-mail address _____

PONY CLUB INFORMATION

Region Name _____ Pony Club _____

Year Joined _____ Present Rating _____ When Passed _____

Has applicant tested previously for requested rating? Yes No When? _____

Explain steps taken to correct problems from previous testing (*attach additional sheet if necessary*): _____

TEST REQUEST

Region

Date

1st Choice _____

2nd Choice _____

3rd Choice _____

Candidate Signature _____ Date _____

Parent Signature _____ Date _____

DC Signature _____ Date _____

DC ascertains that the C-3 candidate is teaching simple mounted lessons to D-level Pony Club members (under supervision) at the club level. **NO ADDITIONAL LETTER NECESSARY.**

RS Signature _____ Date _____

FOR OFFICE USE ONLY

Dues Paid Authorized to Test Assigned Test _____ Check # _____

