	Narı	rabri & 1						nination F	orm	
Eamily Name		1		FAN	IILY DETA	ILS	,			
Family Name										
Parents First Name										
Family Addre	SS									
Town				2	tate			Postcode		
Emergency Contacts	Mot	iner		Mo	bile		HC	ome	Work	
Contacts	Fath	ner								
Email					Rider's	Clul	b			
			-	RID	 ER SUMM	ARY	7			
Surname		First	Name		DOB		/F	School Year	Jump Grade	2017 Troo
								Tear	Grade	1100
			PUR	RPLE	E TROOP C	NL	Y			
Child's	Nam	e		Experience			Is your child on the			
			Beg	inne	ner/Intermediate lead?					
			•							
PURPLE TRO	OOP	WORKI	NG B	EES	S & CAMP 1	HEL	P			
Parents of Pu								orking bee	before o	r
after camp &	one	shift on	the re	ostei	below:					
			Ann	lα 8 τ	Bikies		RE	3Q Lunch o	on Thurse	lav
		(colle			n to kitche	n)	DI	(collect &		iay
		kitchen)								
Tuesday								Not rec	•	
Wednesday Thursday								Not red	quired	
IIIaisaay						<u> </u>				

Office Use Only: Date Received: _

Name:	•••••		•••••		
Instruction availability child shoule of prefere	al Groups. E of Instructo d indicate pr nce at the	very effort is maders may mean that references as there	e to ensur some elec are limite page (Pl	e all Electives ar tives are withdra ed places in each s note: <u>Strictl</u> y	eek to assist with Electives & re available, however numbers & awn from the program. Each a elective. Pls write in order y one page per child so op of the page)
Electives or	offer this y	ear are:			
1. Sho	w Jumping	2. Dressage	3. Show	v Presentation	4. Horsemanship/Stockhorse
5. Can	pdrafting	6. Tent Pegging	7. Polo	crosse	
Show Jump	ing involves	:			
- Ridi - Cour - Scor					
Dressage in	volves:				
HowScor	to learn a te ing and com				
Stock Hors	e involves:				
- Juni - Wor - Time	Classes or Judging king and Ha e Trials e will be a co		nior Judgi	ng and a Mini S	tock Horse Challenge
		ite the elective from write actual ele		ve list in order o	of choice) DO NOT WRITE
1.		2.		3.	4.
5.		6.		7.	

Please fill in details for **each** child

	RIDER DETAILS – CHILD No1					
Surname	First Name	Experience Beg/Int/Adv	How many times per week do you ride?			
	RIDER DETAILS – CH					
Surname	First Name	Experience Beg/Int/Adv	How many times per week do you ride?			
	RIDER DETAILS -CH					
Surname	First Name	Experience Beg/Int/Adv	How many times per week do you ride?			
	RIDER DETAILS – CH					
Surname	First Name	Experience Beg/Int/Adv	How many times per week do you ride?			
	<u>. </u>					
	DID DD D DD 1-2 2		1			
2	RIDER DETAILS – CH					
Surname	First Name	Experience Beg/Int/Adv	How many times per week do you ride?			
	RIDER DETAILS – CH					
Surname	First Name	Experience Beg/Int/Adv	How many times per week do you ride?			
	-					

Medical Details

Please complete a separate form for each child attending camp

Due to WHS issues medication will be administered by parents only and is not to be left at camp - the responsibility to medicate children will not be placed with the dorm matrons/stewards. Children are NOT allowed to have medication (Pain tablets, cough medicine etc.) with them – only exception will be if they have life threatening illnesses (Diabetes, Asthma etc.)

Child's Name:		DOB:
Address:		
Medications:		
Allergies:		
Dietary Requirements:		
Asthma:		
Diabetes:		
т ч		
Epilepsy:		
Attention Deficit Disorder:		
Other:		
		Phone No:
Doctor's Name:		I Holic No.
Doctor's Name: Medicare No:		
Medicare No:	nergency Contact Deta	Child Number on card
Medicare No:	nergency Contact Deta	Child Number on card
Medicare No:	nergency Contact Deta	Child Number on card
Medicare No: Emergency Contact Name:	nergency Contact Deta	Child Number on card
Medicare No: Em Emergency Contact Name: Relationship to Rider:		Child Number on card
Medicare No: Em Emergency Contact Name: Relationship to Rider: Phone Home:	Work:	Child Number on card
Medicare No: Em Emergency Contact Name: Relationship to Rider: Phone Home: Mobile:	Work:	Child Number on card
Medicare No: Em Emergency Contact Name: Relationship to Rider: Phone Home: Mobile: Alternative Emergency Contact	Work:	Child Number on card

Nomination Form

Family Name:		First Name:			
Please list Surname of child if diff	Contact Number:				
<u>Membership Fees</u>	<u>Qty</u>	<u>Amount</u>	<u>Total</u>		
Riding Membership		\$77			
Non Riding Membership		\$42			
(At least one parent to be a riding or non-riding member)					
riding of non-riding member)		Sub Total			
Camp Fees					
1 Child		\$145			
2 nd & subsequent children		\$135			
		Sub Total			
Purple Troop		\$60			
		Sub Total			
Camping Fee – for adults and all children not attending pony		\$10			
camp (Per Site)					
		Sub Total			
<u>Meal Tickets</u>					
Adult – full week		\$40			
Under 12 years – full week		\$15			
One Day – breakfast, lunch,		\$20			
dinner					
Purple Troop - Adult 3 days		\$30			
		Sub Total			
Working Levy		\$300			
		Sub Total			
		TOTAL PAYABLE			
Bank Details for Direct Deposit (Preferred Option)					

Account Name: Narrabri & District Pony Club Inc. BSB: 062 582 A/C No: 00910707

If paying by direct deposit, please ensure you put your child's name as the reference and send a copy of the remittance advice with your nomination forms Send Nominations to: Narrabri & District Pony Club Inc. Cheques payable to: **PO Box 453** Narrabri & District Pony Club Inc.

Narrabri NSW 2390

	Office Use Only	
Date Payment Received: _	Chq No	Cash / DD

Rider

Parents / Guardian Name

As a rider at the Narrabri Pony Camp, I will abide the following ethics:

- 1. I understand that bullying will not be tolerated under any circumstances depending on the severity of the incident could lead to expulsion from camp with no refund or if necessary higher authority action will be taken.
- 2. I will respect the rights, dignity and worth of fellow riders, instructors, officials and spectators.
- 3. I respect the talent, potential and development of fellow riders and competitors.
- 4. I will care and respect the equipment provided by Narrabri Pony Club.
- 5. I will respect and care for my horse and fellow rider's horses.
- 6. I will conduct myself in a professional manner relating to language, manner, temper and punctuality.
- 7. I will abide by the Narrabri Pony Club rules and respect the decision made by officials.
- 8. I agree at all times to comply with the NSW Pony Club rules & regulations and the event

from camp.
\Box I acknowledge that I have read and understood the information above and have explained & discussed it with my child/children and they will abide by the Code of Conduct at all times.
□ I have read and understood the Annual Camp Rules and Information document and I have discussed it with my child/children.
Parents / Guardian Signature
Parents / Guardian Name Date Parents As a parent of a rider at the Narrabri Pony Camp, I will abide the following ethics:
 Remember that children participate in sport for their enjoyment, as well as yours. Encourage children to participate, do not force them. Focus on the child's efforts and performance rather than winning or losing.
4. Never ridicule or yell at a child for making a mistake or losing an event.
5. Show appreciation for instructors, officials and administrators – without them your child couldn't participate or attend camp.
6. Remember children learn best by example - abide by the Narrabri Pony Club rules and respect the decision made by officials.
7. I agree at all times to comply with the NSW Pony Club rules & regulations.
\Box I acknowledge that I have read and understood the information above and will abide by the Code of Conduct at all times.
□ I have read and understood the Annual Camp Rules and Information document.
Parents / Guardian Signature

Date

Name:	WWCC Number:

Rosters

Narrabri Pony Camp requires a huge amount of assistance to run safely & effectively. Help can be in the form of parents, guardians, grandparents, aunts, uncles or brothers & sisters over 18yrs and must complete 6 shifts for the week of camp. Visitors are required to work an additional 3 shifts during the week if unable to help at the working bees. As required by NSW Government – Working with Children Department, all volunteers MUST complete and return the attached Member Protection Declaration. One form per volunteer – if you have already completed one within the last 2 years for Narrabri Pony Club that is sufficient.

Please indicate on the following rosters where and when you are able to assist.

Working Bees – These are held before and after camp

Grounds				
(One Working Bee before camp and the Working Bee after camp is compulsory)				
Saturday 22nd September	Name:			
, ,				
Sunday 23rd September	Name:			
_				
Sunday 7th October 9am	Name:			
(Compulsory)				

Kitchen					
(One working bee before cam	(One working bee before camp and the working bee after camp is compulsory)				
Saturday 22nd September	Name:				
Sunday 23rd September	Name:				
Sunday 7th October 9am	Name:				
(Compulsory)					

Camp Rosters

(Please indicate preferred times and days with your name, every endeavour will be made to accommodate your preferences, however this is not always possible)

Kitchen Host: Steve Falkiner					
	6am – 10am	10am – 2:30pm	2:30pm – 8pm (Includes 1 ½ hours break at approximately 3- 4:30PM)		
Sunday	NOT REQUIRED	NOT REQUIRED			
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday		NOT REQUIRED	NOT REQUIRED		

Apple & Bikkies						
	9:30am – 11am	1:30pm – 3pm				
Sunday	NOT REQUIRED					
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						

Groundsmen: Dave Larsen							
	9am – 12:30pm	1:30pm – 5pm					
Sunday	NOT REQUIRED						
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
	Tootologi	st					
	9am						
Sunday	NO	Γ REQUIRED					
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
	Feed Room: Chris	s Manning					
	All Day						
Sunday Afternoon							
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday Morning							

Male Dorm Co-Ordinator: Dale Mason

The Senior & Junior boy's dorms are always difficult to organise supervision. It was decided after several discussions that NPC require males to supervise boys in the dorm and that there should be a minimum of two adults supervising at any one time. There will be a roster for the fathers/guardians of the boys in that dorm to sleep there at least one night during the week (this will count as your daily shift – Sunday night will be Sundays shift etc.). There will be a list of duties in the dorm to assist them so that they will know what the procedure is and when it is to be done.

(Please indicate preferred times and days with your name, every endeavour will be made to accommodate your preferences, however this is not always possible)

	Junior Boys	Senior Boys
Sunday		
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

Female Dorm Co-Ordinator: Dale Mason

There will be a roster for the mother/guardians of the girls in that dorm to sleep there at least one night during the week (this will count as your daily shift – Sunday night will be Sundays shift etc.) There will be a list of duties in the dorm to assist them so that they will know what the procedure is and when it is to be done.

(Please indicate preferred times and days with your name, every endeavour will be made to accommodate your preferences, however this is not always possible)

	Junior Girls	Middle Girls	Senior Girls
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			

SATURDAY GYMKHANA ROSTER

All parents are required to complete at least one shift on Saturday

Please add your name to any of the following areas listed below

Canteen Coordinator: Kim Mason

	9am	10am	11am	12pm	1pm	2pm	3pm	4pm
Name								

Sporting Events

Sporting Events								
	Bends	Barrels	Bounce Keyhole	Flag Race	Bonfield Bounce	3-Mug Race		
Name								

Groundsman

	8:30am – 12:30pm	1:30pm – 5pm
Name		

Red Coat

Na	ame			