



Form 10.2.7

PONY CLUB TASMANIA Inc.
SENIOR VOLUNTEER SERVICE AWARD NOMINATION FORM

Please type or print.

NAME: _____ **YEAR OF JOINING PC:** _____

ADDRESS: _____

MEMBER OF: _____ **CLUB / ZONE /ASSOC.**

THE FOLLOWING QUESTIONNAIRE IS TO BE USED AS A GUIDE WHEN SELECTING A NOMINEE FOR THE PCT Inc. SENIOR SERVICE AWARD

Has the nominee given twenty years voluntary active service to the Pony Club movement? (Service to commence after the age of 25 or after leaving the Club as a riding member.) State dates or commencement only, if still active.

Has he/she upheld the Aims and Objects of the Pony Club movement?

In what way have they been an outstanding senior who has given exceptional service to the Club, Zone or Association, i.e. Administrator, Events Organiser, Volunteer Coach, Examiner etc.? (May be in just one area or a combination of a group of services.)

PLEASE COMPLETE IN DETAIL OTHERWISE THE NOMINATION WILL NOT BE ACCEPTED.

If additional space is required write on the back of this page or a separate page may be attached.

RECOMMENDATION BY THE ZONE BOARD REPRESENTATIVE

SIGNED: _____ **BOARD REPRESENTATIVE of the** _____ **ZONE**

THE NOMINATION FORM IS TO BE SIGNED BY TWO OF THE FOLLOWING PERSONS:

NB. If the nominee is a relative of any of those eligible to sign this form, then two of the others should do so.

SIGNED: _____ **V. COMM. / DISTRICT COMM / PRESIDENT / SECRETARY**

SIGNED: _____ **V. COMM. / DISTRICT COMM / PRESIDENT / SECRETARY**

_____ **CLUB / ZONE** **DATE:** _____

NOTE: NOMINATIONS FOR THE PCT SENIOR SERVICE AWARD SHOULD BE FORWARDED TO THE STATE SECRETARY WHEN DEEMED APPROPRIATE