LEVEL:

LEVEL:

HIGHEST EVER NON HRCAV LEVEL

HIGHEST EVER NON HRCAV LEVEL

**OTHER RELEVANT RIDING** 

**EXPERIENCE** 

**DISCIPLINE:** 

**DISCIPLINE:** 

Horse Riding Clubs Association of Victoria Inc. (A0002667H)

PO Box 209, NUNAWADING, 3131 **PH** 9877 0330 **FAX:** 9877 9400 Email: <a href="mailto:info@hrcav.com.au">info@hrcav.com.au</a> Website: hrcav.com.au

## **EXPRESSION OF INTEREST HRCAV 3 Phase Equitation Judge**

Members seeking accreditation as an HRCAV Official must register their interest by forwarding a completed form and any other relevant details to the HRCAV. Upon consideration of details provided, successful applicants shall be registered as a new candidate and be invited to commence the accreditation process. An overview of the accreditation process can be found in the relevant section of the HRCAV Manual and forthcoming training and examination day(s) are advertised in the HRCAV newsletter. Note: Applicants must be at least 18 years of age.

NAME:		MEMBERSHIP#:					D	DATE:						
ADDRESS:												POSTCODE:		
EMAIL:		PHONE NO:												
SIGNATURE:		CLUB:												
WORKING WITH	CHILDR	REN CHEC	CK											
DO YOU HAVE A CURRENT WWCC?						ARE YOU EXEMPT FROM THE				4F	REASON FOR EXEMPTION			
YES			NO						MENT?					
WWCC CARD HO	ND SHOV	V JUDGES I		-		YES			NO		REGISTERED TEACHERS & POLICEOFF			
	UNLES	S EXEMPT				1 E 3			NO		– PLEASE RECORD RELEVANT ID NUM			
SELECT THE APPRO	OPRIAT	TE ANSW	ERS											
RIDING EXPERIENCE														
			CURR	RENT HRCA	V LEVE	L AND H	OW L	ONG	G AT THI	S LEVEL				
	LEVEL	HOW LONG?	LEVEL	HOW LONG?	LEVEL	HOW LONG?	LEVE	L	HOW LONG?	LEVEL	HOW LONG			
Dressage	5		4		3		2			1/ Adv		Not assessed		
Showjumping	5		4		3		2			1/ Adv		Not assessed		
Horse Trials	5		4		3		2			1		Not assessed		
Showing	5		4		3		2			1		Not assessed		
3 Phase Equitation	5		4		3		2			1		Not assessed		
				HIGHES	T EVER	HRCAV	ASSES	SSEI	D LEVEL					
DRESSAGE		SHOW JUMPING			HORS	HORSE TRIALS			SHOWING			3 PHASE EQUITATION		

May 2023

TRAINING AND IN THE FIELD EXPERIENCE												
Please tick	1	2		3	4 or m	nore	None					
Number of HRCAV Training												
Number of Non-HRCAV Training Clinics Attended												
Type of Training Clinic/s attended:					When Attended							
DRESSAGE (please tick)												
Judging	< 5 times		< 20 times		< 40 times			>40			Never	
Level/Grade	LvI/Gr 5		Lvl/Gr 4		L3/Prelim		L2/Nov			L1/Elem & Above		
Pencilling Experience	< 5 times		< 20 times		< 40 times			>40		Never		
3PE (please tick)												
Judging	< 5 times		< 20 times		< 40 times			> 40		Never		
Level/Grade	Lvl/Gr 5		Lvl/Gr 4		L3/Prelim			L2/Nov		L1/Elem & Above		
Pencilling Experience	< 5 times		< 20 times		< 40 times			> 40		Never		
COACHING EXPERIENCE												
Have You Ever Coached	YES NO											
Type Of Coaching												
Qualifications					•							
Coaching Experience Under 1 yr			1-2 Yrs		3-4 Yrs 4-5Y			rs .		Over 5 Yrs		
QUALIFICATIONS												
Do you have relevant forma												
eg. EA? Please state type of qualification and date obtain	:											
OTHER EXPERIENCE												
Other relevant DRESSAGE						ОТЫ	THER					
experience/qualifications (t	SSAGE LEVE GE ASSE						Decify:					
Recent relevant appointments – including date, location & event												
Discipline Specific Referee (not compulsory												
Motivation for seeking accreditation												

Applicants who can show proof of qualifications and/or extensive experience in their area of interest may be eligible for training  $concessions \ at \ the \ discretion \ of \ the \ relevant \ Sub \ Committee. \ Please \ attach \ proof \ of \ relevant \ qualifications \ where \ applicable. \ The$  $original\ of\ this\ form\ will\ be\ kept\ at\ the\ HRCAV\ of\!fice\ and\ a\ copy\ sent\ to\ the\ relevant\ Sub-Committee.$