

MidSouth Region DC Affidavit

I, _____, as District Commissioner (DC) of
_____ Pony Club in the Midsouth Region
have assured the appropriateness of this mount / rider combination,

_____/_____,
Name of Rider / Name of Mount

_____/_____,
Name of Rider / Name of Mount

_____/_____,
Name of Rider / Name of Mount

_____/_____,
Name of Rider / Name of Mount

_____/XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX_____,
Name of Stable Manager / Name of Mount

at the level for which they are entered for participation in this pony club
activity, _____.
Name and Place of Pony Club Activity

I also verify mount and rider equipment, both riding and safety, have
been checked for proper fit and suitability according to USPC Rules and
Standards. (Ex: Helmets, stirrups, bits, etc.) *See USPC Rulebooks.*

We understand **NO** Pony Club Competitor is allowed in, on, or to
operate any motorized vehicles (Ex: golf carts, motorized scooters,
ATVs, etc.) during the competition's open barn hours. If this rule is
violated, Horse Management penalties may be assessed. *Also see Park
Rules.*

Signed: _____
District Commissioner

Date: _____