



Deep South Region Quiz Rally 2010



October 25, 2009
Harrison County Fairgrounds Gulfport, Mississippi
following Games Rally



Hosted by: **Mobile Bay Pony Club**

Technical Delegate: Jackie Horn

Classroom Judge: Frank Horn

Scorer: Joan Singletary



This rally will consist of four phases: Classroom, Mega Room, Stations and Written Test and will be judged according to the USPC Handbook and Rules for Quiz Competition 2007.

NOTE: Deep South Region requires ALL pony clubbers who intend to qualify for National Championships 2010 to have attended at least one Quiz Rally while a member of USPC.

Deadline for entries: October 10, 2009

Entry Fee Per Participant:

Received by October 10, 2009 \$ 40.00

Received after October 10, 2009 \$ 45.00

Include with entries:

1. Quiz Competitor Entry Form (One per member – original signatures only)
2. Competitor's Rally Release Form (One per member- original signatures only)
3. Medical Release (One per member- may be a copy)
4. Team Entry Form (One per club)
5. Chaperone Duties Form (1 per team per division)
6. Volunteer Names (include the name of at least 1 rally volunteer for every member competing)
7. Club Check for the entry fee as stated above (Make checks to Mobile Bay Pony Club).

Send entry packets to:



**Debbie Frey, Mobile Bay PC
28070 Rigsby Rd
Daphne, AL 36526
251-709-8033**

Tentative Time Schedule

Sunday

7:30am-Check-In

8:15am-Official's/Volunteer Briefing

9:00am-Competitor's Briefing/Written Test

10:00am-Phase Competition Begins

12:00pm – Lunch Break

1:00pm – Competition Resumes

3:00pm-Approximate End of Competition, Scores Finalized

4:00pm – Awards

TEAM COMPOSITION

Teams will belong to one of five divisions based on a member's age as of January 1, 2010 and rating at the time entries are due as outlined below:

Junior D (& Unrated) – 12 years of age or less

Senior D (& Unrated) – 13 years of age and up

D teams consist of any combination of unrated through D-3 Pony Club members.

Unrated Pony Club members compete as D-1s and abide by D regulations

Teams to consist of 3 or 4 members

Junior C/B – 14 years of age or less

Senior C/B – 15 years of age and up

C/B teams consist of any combinations of C-1 through B

Teams to consist of 3 or 4 members

B/H/H-A/A

Teams to consist of 2 members of any age

FURTHER GUIDELINES:

- Each team will have one member designated as the Captain of that team.
- The Organizer will form scramble teams by placing individual entries on a short team from another club. Every effort will be made to keep members from the same club together.
- Teams comprised of both junior and senior individuals will be required to compete in the Senior Division. NOTE: A junior may compete on a senior team only with his/her consent AND the consent of his/her DC
- To qualify for this year's Championships, participants must have reached the age of 10 as of January 1, 2010 and competed as at least a D2 at this Regional Qualifying Quiz Rally.
- **DRESS**---Clean, neat attire. Shirts must have sleeves and no inappropriate logos. Appropriate footwear will be required during the stations phase for both competitors & volunteers. USPC pin and name badge will be required during all phases of the rally. Only other jewelry that will be allowed is a medic alert bracelet or necklace, watch, wedding ring, and **ONE** stud earring in each ear.
- **SPECTATORS** — If space allows, ADULTS ONLY will be allowed to observe the classroom. If time allows, the Stations and Barn areas will be open for viewing after competition in each of these phases is complete.
- **FOOD** --- Available at the concession stand.

For additional information please contact:

Debbie Frey, DC, Mobile Bay Pony Club, freyfarm3@yahoo.com 251-709-8033

Karen Symons, Jt. DC, calicofarm@aol.com 251-454-2596

Kate Menees, PC supporter and friend ☺, kmenees27@gmail.com 251-689-2774

QUIZ NEWSLETTER 2009



The Quiz committee has made the following changes and clarifications for the 2009 competition year:

- 1) The age limit for individuals planning to compete at Championships will be 21 instead of 25 years of age. At the Regional competition there is no age restriction.
- 2) Classroom questions for 2009 will use the 2008 Standards. For all other Quiz phases, questions will be based on the 2009 Standards
- 3) Because of the Specialty ratings, the classroom questions for the C-3 and above competitors will be determined by the competitors' highest Horse Management rating. For example: even though a competitor is a C+, they would be given a C-2 question and a B would be asked H-B questions. D-2 – C-2 competitors will be judged at their rating.
- 4) On page 19 of the Quiz Organizer's Guide, the 'Name the Liquid' station will be eliminated from competitions for safety reasons.
- 5) The resources list has been updated with two new books. In addition, while it still lists several books that are unavailable, they will remain in the resource list until we find replacements. Check the Quiz website for changes and updates



COMPETITOR ACTIVITY/ RALLY RELEASE

Name of Competitor _____

The undersigned competitor ("Competitor") and his/her parent(s) or legal guardian(s) ("Parent(s)"), have elected to participate, or in the case of Parent(s), permit the Competitor to participate, in the USPC, **Deep South Region 2009 Quiz Rally** to be held on **Oct 25th, 2009** at **Harrison County Fairgrounds, Gulfport, Mississippi**

and hereby acknowledge, represent, warrant and agree that:

- (1) the acceptance of competitor as a participant in the Activity by the United States Pony Clubs, Inc. does not constitute a determination of any nature by the United States Pony Clubs, Inc., its affiliates, employees and agents ("USPC") that the Activity is suitable, safe or otherwise appropriate, for Competitor, by reason of Competitor having attained any specific USPC Rating Level or otherwise, and that USPC makes no determinations, evaluation, representation or warranty to any such effect,
- (2) they understand the Activity and the jumps, courses and equestrian performances, competitions and activities (mounted or un-mounted) constituting the Activity, any and all of which may, in fact, be more difficult and different than those constituting the jumps, courses and equestrian performances, competition and activities (mounted or un-mounted) used in establishing, testing for and assigning or awarding any USPC (or other organization's) Rating Level,
- (3) they understand that equestrian activities such as the Activity are inherently dangerous and that they accept the inherent risks involved therein (including, without limitation, the risk of injury, death and damage or destruction to or of horses and other property),
- (4) the decision to participate in the Activity, and any evaluation of the Competitor's ability to safely and competently participate therein, has been made at the sole and absolute discretion of the Competitor and Parent(s) and Competitor and Parent(s) accept complete responsibility for such decision and such participation,
- (5) Competitor and Parent(s) have read and understand the policies and regulations governing the United States Pony Clubs, Inc., participation in activities sponsored or operated by it, and specifically the rules of the Activity, and each agree to abide by such rules, as now in effect, and as amended and in effect from time to time hereafter,
- (6) Competitor and Parent(s) understand that failure to adhere to the code of conduct and/or policies and regulations may result in dismissal from the competition or other such action as deemed necessary by the officials of the competition.
- (7) Competitor's entry into this competition constitutes his/her release to photograph and/or videotape and publish and/or broadcast his/her involvement in this competition to USPC.
- (8) Competitor and Parent(s) each hereby release and agree to hold harmless USPC, its officers, agents, representatives as well as the land owner, his heirs, estate, etc. from and against any claims and causes of action, Competitor or Parent(s) (or their respective successors, representatives, heirs or assigns) may have as a result of Competitor's participation in above stated Activity.
- (9) participation in a USPC Activity/Rally is a privilege, not a right, and entry and/or participation may be refused at any time, with or without cause, for any reason, in the sole and absolute discretion of the Regional Supervisor/ Organizer, including but not limited to the determination that the entry and/or continued participation might obstruct the activity and/or reflect adversely on the USPC.
- (10) they expressly assume all risks of harm to competitor or competitor's mount, including harm resulting from negligence of the USPC or the USPC activity, and specifically agree to the applicable state statute/law regarding equine/farm animal activity liability and signed posting (if any), in any state in which competitor participates in a USPC activity. A true copy of the state statutes in effect at the time of the execution of this agreement is included and incorporated herein.

Signature of Competitor - if legal age of majority for the participant's state of residence or emancipated _____ Date _____

Signature of Parent (only one needed)

Date

Signature of 2nd Parent (Optional)

Date

DEEP SOUTH REGION QUIZ RALLY
COMPETITOR INFORMATION FORM

Name of Competitor: _____

Name of Pony Club: _____

DOB: _____ Age as of 1/1/10: _____ Rating as of 10/10/09 _____

Phone: (HM): _____ (CELL) _____

Email: _____

Quiz Division Competing In: Jr. D ___ Sr. D ___ Jr. C ___ Sr. C ___ B/H/H-A _____

NOTE: Chaperones must read and bring copy of current Rule Book

The above information is correct for the 2009 DSR Quiz Rally.

Signature of Pony Club Member Date

I/We, the parent(s) of _____ have reviewed the above information and we agree to allow our child to compete in the discipline and at the level as so noted above.

Parent/Guardian Signature (Only 1 signature required) Date Parent/Guardian Signature Date

CODE OF CONDUCT

USPC is proud of its reputation for good sportsmanship, horsemanship, teamwork and well-behaved members. The USPC and the organizers and officials of USPC Activities/Rallies expect appropriate behavior from all competitors, parent(s) and others participating in any USPC Activity/Rally.

Inappropriate behavior is, but not limited to:

- Possession, use, or distribution of any illegal drugs or alcohol
- Assault
- Profanity, vulgar language or gestures
- Harassment – using words or actions that intimidate, threaten or persecute others
- Cheating
- Abusing a horse

Any USPC member or parent not conforming to the Code of Conduct is subject to the following action:

1. The Officials of the competition may immediately suspend or expel an individual from the competition upon consulting with the Ground Jury.

I have read and agree to abide by the above Code of Conduct and the Quiz Rally Rules and Regulations.

Competitors Signature Date

AND

Parent/Guardian Signature (only one required) Date



2009 MEDICAL RELEASE FORM

USPC ♦ 4041 Iron Works Pkwy ♦ Lexington, KY 40511-8483 ♦ (859) 254-7669 ♦ memberservices@ponyclub.org

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Section 1. ASSUMPTION OF RISK AND WAIVER

I understand that there are inherent risks of serious injury or even death possible with equine activities. I hereby, intending to be legally bound, for myself, my heirs, and assigns, executors and administrators, waive and release forever any and all liability, and all claims for damages against The United States Pony Clubs, Inc. (USPC), Board of Governors, Instructors, Administrators, Volunteers and/or Employees for any and all injuries and/or losses I/my son/my daughter/my ward may sustain associated with my child's voluntary participation in USPC activities.

OR

ORIGINAL SIGNATURE OF USPC MEMBER APPLICANT DATE
REQUIRED IF APPLICANT IS OF THE AGE OF MAJORITY IN THEIR STATE OF RESIDENCE

ORIGINAL SIGNATURE OF APPLICANT'S PARENT OR LEGAL GUARDIAN DATE
REQUIRED IF APPLICANT IS UNDER THE AGE OF MAJORITY IN THEIR STATE OF RESIDENCE

Section 2. USPC MEDICAL WAIVER AND TREATMENT RELEASE

In consideration of my/my child's participation in a United States Pony Club, Inc. (USPC) activity, and the inherent risks of equine activity that may result in injury/harm requiring emergency medical treatment, I authorize the United States Pony Club, Inc., its successors or assigns, officials, officers, directors, employees, agents and/or volunteers to obtain and release to any USPC activity personnel (including, but not limited to, organizers, instructors, test examiners, chaperons), and to any first aid and safety personnel, medical professionals, and treating medical facility, any information regarding my/my child's medical history, symptoms, treatment, exam results and/or diagnosis.

I have read this entire release and agree to it.

OR

ORIGINAL SIGNATURE OF USPC MEMBER APPLICANT DATE
REQUIRED IF APPLICANT IS OF THE AGE OF MAJORITY IN THEIR STATE OF RESIDENCE

ORIGINAL SIGNATURE OF APPLICANT'S PARENT OR LEGAL GUARDIAN DATE
REQUIRED IF APPLICANT IS UNDER THE AGE OF MAJORITY IN THEIR STATE OF RESIDENCE

RELATED INFORMATION

Club No. _____ Club Name _____ Region _____

Member Name _____ Birth Date ____/____/____

Parent(s)/Legal Guardian(s)/Spouse _____

Address _____

Home No. (____) _____ - _____ Cell No. (____) _____ - _____ Work No. (____) _____ - _____

If Parent or Guardian is unavailable,

Contact _____ Phone No. (____) _____ - _____

Family Physician _____ Phone No. (____) _____ - _____

My child is allergic to _____

Other medical conditions _____

My child takes the following medications _____

_____ for _____

Medical Insurance Company _____ Policy No. _____

NOTE: As a member of the United States Pony Clubs, Inc., the above named child is insured for emergency accident medical treatment under the USPC Accident Plan. This coverage is in excess of valid and collectible benefits available under any Blue Cross or Blue Shield group plan, or any group, blanket or franchise insurance plan.

SPECIAL INSTRUCTIONS

As parent or guardian of the above named child, please attempt to contact me at the time of the accident or illness without postponing medical treatment.

Other _____

OTHER INSTRUCTIONS FOR TREATMENT RELEASE

Organizers and DCs must retain this form with original signatures on file. Various officials may hold copies; e.g. medical personnel on site, instructors, test examiners and chaperones.

REPORT OF EXISTING MEDICAL CONDITION(S)

Does the above named Pony Cub member have any medical condition(s) that may be affected by mounted or unmounted participation in Pony Club activities? Yes No

IF YOU ANSWERED YES TO THE ABOVE QUESTION, COMPLETE SECTION 3 ON PAGE 2.

Section 3. MEDICAL RELEASE FOR ACTIVITY PARTICIPATION FOR MEMBERS WITH A PRE-EXISTING MEDICAL CONDITION

Member Name _____

The USPC wishes to take reasonable steps to maintain the safety of USPC members. Members with medical /disabilities conditions (including pregnancy) that may be aggravated by mounted or unmounted activities must provide a MEDICAL RELEASE FOR PARTICIPATION Form signed by the examining physician.

A copy of this form must be on file with:

- ♦ the Club DC for club activities, or
- ♦ the RS for regional activities, or
- ♦ the USPC National Office for national activities.

USPC leaders and instructors always have the sole discretion to remove any individual from an activity if safety is a concern.

A copy of the USPC Standards of proficiency for the rating level of the individual member MUST be provided to the physician for review. In USPC ratings, the Standards of Proficiency are not to be modified or adapted to enable the individual to meet the standards.

This notice must be given at least 15 days prior to participation.

The responsibility for notice of a medical condition/disability and providing the completed release in a timely manner lies solely with the USPC member, parents, and/or legal guardian. The parents are also responsible for updating this release if the medical condition changes. USPC leaders are not required to seek out members and inquire about medical conditions.

PENALTY

The failure to provide the USPC leaders with information regarding a member's medical condition/disability and to comply with the guidelines for notice, medical participation release, and consent requirements shall require that the member be disqualified from participation in USPC activities, and shall be a material misrepresentation that the USPC member has no medical condition/disability which might affect his/her participation.

EXAMINING PHYSICIAN'S RELEASE

Physician Name _____ Office No. (_____) _____ - _____

Address _____

Licensure No. _____ State of _____

The above-named member has been seen by me on _____ / _____ / _____

I hereby release the above named USPC member to participate in mounted and unmounted equine activities. I am familiar with all of the requirements of USPC mounted and unmounted events. If I believe the member may participate in some of the events, but not in others, I will list them below.

Medical Condition _____

Limitations (use additional pages to explain, if necessary) _____

Physician Signature _____ Date _____ / _____ / _____

Uniform Chaperone Rules/Duties

This form is for

Club: _____ Team/Individual: _____

Chaperone duties shall include:

1. The primary function of the “official team Chaperone is to ensure that there is a contact person for each team or individual present and on grounds for the duration of the competition. Team Chaperones must be available to Rally Officials and team members at all times.
2. Have copy of and be familiar with the rules for the competition (discipline rulebook) and the current edition of the HM Handbook and Rules for Rally. . Rulebooks can be downloaded from the USPC website at ponyclub.org
3. Uphold USPC Policy 0500 Drug/Alcohol/Tobacco. Chaperones must refrain from using alcohol or other substances when they are serving in their “official capacity” as team Chaperone -refer to USPC website ponyclub.org for full policy statement
4. Be present and available to Rally Officials and all team members for the duration of the competition. Delegate duties to another individual if for any reason you must leave the competition grounds during the hours of competition to respond to a request by the Rally Officials or any team member.
5. Be sure to have a means of contacting parents or designated responsible person for all team members in the event that you should need to contact them during the hours that you are responsible for those team members (hours of competition).
6. Have a means of contacting all team members and the parent or responsible person for those hours after competition and when not on competition grounds (evening/nights).
7. Know the plans for the control of and administration of any prescribed medications that are taken by a team member. Be fully aware of the plan for any emergency medications that may be indicated such as Epi-Pens or inhalers to include the location of these medications. Any plans for administration of medications by any other than a parent/guardian must be decided by the parent/guardian in agreement with the person assuming that responsibility in their absence
8. Be familiar with the effects of heat and humidity and the potential risk for heat related illness. Take active role in helping to keep all team members well hydrated, the importance of hydration cannot be overstated! Take every opportunity to encourage water breaks. Refer to the Uniform Officiation Rules found in the current HM Handbook and Rules for Rallies.
9. Delegate duties of the team Chaperone to another responsible adult if for any reason you should have to leave the competition grounds during the hours of competition making it clear that they are to respond to Rally Officials and any team members in your absences. Be sure to leave the copies of USPC Medical Release forms and all contact information with this person.
10. In cases of Scramble Teams the Competition Organizer will determine the “Official Team Chaperone”.

I, _____, have read and understand the duties of a chaperone as listed
Name of Chaperone (Please print)
above.

Chaperone Signature

Date

Cell Phone Number

DEEP SOUTH REGION QUIZ TEAM ENTRY FORM

CLUB: _____

TEAM A

DIVISION: ___ Jr D ___ Sr D ___ Jr C ___ Sr C

Competitor	Captain	Age (as of 1/1/10)	Rating (as of 10/10/09)

TEAM B

DIVISION: ___ Jr D ___ Sr D ___ Jr C ___ Sr C

Competitor	Captain	Age (as of 1/1/10)	Rating (as of 10/10/09)

TEAM C

DIVISION: ___ Jr D ___ Sr D ___ Jr C ___ Sr C

Competitor	Captain	Age (as of 1/1/10)	Rating (as of 10/10/09)

SCRAMBLERS

Competitor	Division	Age (as of 1/1/10)	Rating (as of 10/10/09)

