**Request for special consideration for reduced qualifiers for IQ State Championships.**

**Date submitted:** Click or tap here to enter text.

|  |  |
| --- | --- |
| Rider Name: | Click or tap here to enter text. |
| Email: | Click or tap here to enter text. |
| School attended: | Click or tap here to enter text. |
| Year level: | Click or tap here to enter text. |
| Horse name: | Click or tap here to enter text. |
| Discipline/s requested | Click or tap here to enter text. |
| Class/es requested | Click or tap here to enter text. |

**Reason for special consideration:**

[ ]  Location [ ] Horse injury [ ] Rider injury [ ] Other

If other, please provide a brief description of the reason: Click or tap here to enter text.

If your request is due to location, what is the nearest Primary/Secondary school to your home address: Click or tap here to enter text. What region is this school in? Click or tap here to enter text.

If your request is due to horse/rider injury, please provide veterinary/medical certificate where applicable.

**Evidence of support for interschool competitions:**

What IQ events have you attended during this qualifying period or you are planning to attend after the closing of entries to the State Championships:

1. Click or tap here to enter text.

2. Click or tap here to enter text.

3. Click or tap here to enter text.

**What qualifiers have you gained for the requested classes on this horse (EA events only):**

1. Click or tap here to enter text.

2. Click or tap here to enter text.

3. Click or tap here to enter text.

**Is there any further information you think will be useful to the IQ committee?**

Click or tap here to enter text.

***Please send completed form to: iq.secretary@equestrianqld.com.au***