## BRITISH CONNEMARA PONY SOCIETY

www.britishconnemaras.co.uk



**Registered Charity No: 262765** 

**Company No. 1006107** 

Executive Secretary & Treasurer Mrs Geth Tillin 24 Mount Pleasant Road, Alton Hampshire GU34 1NN Telephone: 0845 604 9690 or 01420 89114 secretary@britishconnemaras.co.uk

## **PROBATIONER FILLY INSPECTORS REPORT**

**Probationer's Details & Filly Inspection information** 

CONFIDENTIAL

## TO BE COMPLETED BY THE PROBATIONER

| Name of     | State Probationary |
|-------------|--------------------|
| Probationer | Year               |
| Address     | Venue of           |
|             | Filly Inspection   |
|             | Number of Ponies   |
|             | Forward            |
| Post Code   | Date               |

## TO BE COMPLETED BY THE FILLY INSPECTOR

| Probationer Knowledge   | Excellent | Very Good | Good | Fair |  |
|---|-----------|-----------|------|------|--|
| Туре  |           |           |      |      |  |
| Conformation  |           |           |      |      |  |
| Movement  |           |           |      |      |  |
| Limbs & bone  |           |           |      |      |  |
| Communication & Manners   |           |           |      |      |  |
| Please Expand on the above with additional Comments:                          |           |           |      |      |  |
|   |           |           |      |      |  |
|   |           |           |      |      |  |
|   |           |           |      |      |  |
|   |           |           |      |      |  |
| In your opinion should this Probationary Filly Inspector be accepted onto the |           |           |      |      |  |
| BCPS Filly Inspectors Panel   |           |           |      |      |  |

Yes No

If NO please explain why and advise if another Probationary Inspection is required

| Signature of Filly Inspector: |       |  |
|-------------------------------|-------|--|
| Name of Filly Inspector:      | Data  |  |
| (Please Print)                | Date: |  |

Please note each Inspector should complete a separate form for the Probationer.

PLEASE RETURN COMPLETED FORM TO THE SECRETARY AT THE ABOVE ADDRESS