



## Lungeing Log Book

Member Name \_\_\_\_\_  
Member Contact No. \_\_\_\_\_  
Pony Club Branch \_\_\_\_\_  
Region \_\_\_\_\_  
DC Name \_\_\_\_\_  
DC Contact No. \_\_\_\_\_  
DC Signature \_\_\_\_\_

### Qualified Supervisors

Name \_\_\_\_\_  
Qualification \_\_\_\_\_  
Signature \_\_\_\_\_

Name \_\_\_\_\_  
Qualification \_\_\_\_\_  
Signature \_\_\_\_\_

Name \_\_\_\_\_  
Qualification \_\_\_\_\_  
Signature \_\_\_\_\_

Name \_\_\_\_\_  
Qualification \_\_\_\_\_  
Signature \_\_\_\_\_

## **The Lunging Certificate is compulsory**

In order to qualify for this certificate, candidates must:

- a. Successfully complete a minimum of 10 supervised lunging sessions.
- b. Details of each session are to be recorded in the logbook provided, and be signed off by a qualified instructor
- c. Once (a) is complete you can apply (through your branch DC, who will contact the regional tester) to do the Lunge test. This assessment is made up of a theory and practical exam
- d. On successful completion of the Lunge Test a further 10\* lunge sessions are required after the assessment before the certificate will be awarded. (\* The number of sessions will be reviewed from time to time)
- e. If candidates are not successful on the day, the initial 10 supervised sessions must be repeated before being assessed again



Date \_\_\_\_\_  
 Horse Name \_\_\_\_\_

Green	Semi-schooled	Schooled	Competitive	Dressage	Level
Purpose of Lunge? eg exercise, stretching, schooling, backing				Showjumping	Level
				Other	Level
Equipment used					

**Assessment** (describe why equipment was chosen and if it was suitable, how the horse responded and what you would work on in the next session)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Continue on back of sheet

Incident register

**HOURS**

Duration of this session   
 Total hours to date

**Qualified Supervisor**

Name \_\_\_\_\_  
 Signature \_\_\_\_\_



Date \_\_\_\_\_  
 Horse Name \_\_\_\_\_

Green	Semi-schooled	Schooled	Competitive	Dressage	Level
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Incident register

**HOURS**

Duration of this session   
 Total hours to date

**Qualified Supervisor**

Name \_\_\_\_\_  
 Signature \_\_\_\_\_



Date \_\_\_\_\_  
Horse Name \_\_\_\_\_

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Incident register

### HOURS

Duration of this session   
Total hours to date

### Qualified Supervisor

Name \_\_\_\_\_  
Signature \_\_\_\_\_



Date \_\_\_\_\_  
Horse Name \_\_\_\_\_

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Incident register

### HOURS

Duration of this session   
Total hours to date

### Qualified Supervisor

Name \_\_\_\_\_  
Signature \_\_\_\_\_




Date \_\_\_\_\_

Horse Name \_\_\_\_\_

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Incident register

**HOURS**

Duration of this session

Total hours to date

**Qualified Supervisor**

Name

Signature




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Horse Name \_\_\_\_\_

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Duration of this session

Total hours to date

**Qualified Supervisor**

Name

Signature




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Incident register

**HOURS**

Duration of this session

Total hours to date

**Qualified Supervisor**

Name

Signature




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Horse Name \_\_\_\_\_

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Duration of this session

Total hours to date

**Qualified Supervisor**

Name

Signature




Date \_\_\_\_\_

Horse Name \_\_\_\_\_

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Incident register

### HOURS

Duration of this session

Total hours to date

### Qualified Supervisor

Name

Signature




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Horse Name \_\_\_\_\_

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Incident register

### HOURS

Duration of this session

Total hours to date

### Qualified Supervisor

Name

Signature