NEW ZEALAND PONY CLUBS ASSOCIATION INC.

H & A EXAMINATION EXPENSES CLAIM FORM

☐ H ☐ A Examination. Venue(s): _____ Exam Date(s): _____

Please return within seven days on completion of the examination with GST invoices / receipts where applicable

NAME	ADDRESS	DETAILS	AMOUNT $

Name: _____ Signature: _____ Date: _____

Send to: NZPCA Coaching & Training Administrator, 50A Lawrence Road, RD 4, Tuakau, Auckland 2694. Phone: (09) 236 8654