

2010 USPC Research Fair Entry Form

Entries are due December 1, 2009

**Please print off and complete the following form and submit it to:
Dr. Leisha Mullins, P.O. Box 9599, College Station, Texas 77842**

Name: _____

Address: _____

Phone Number: _____

Email address: _____

Age as of January 1, 2010: _____

Current Rating: _____

Your Pony Club/Region: _____

Your DC's Name: _____ DC's Phone Number: _____

Project Title: _____

Which Category are you entering:

_____ 'Real Time' Oral & Display Presentation (10 min max)

_____ 'Audio-Visual' Presentation (10 min max)

Please check the appropriate boxes:

_____ will be using a traditional free standing tri-fold display

_____ will be using an oversized poster presentation that needs a display stand

_____ will present a Power Point presentation

Will you be at the USPC 2010 Annual Meeting Houston, Texas so that you may participate in the Oral Presentation Division? (circle one) YES / NO

If YES, please bring your project with you and check it in at the Registration Desk.

If NO, (you are not able to attend the USPC Annual Meeting) and you wish to compete in the "Audio-Visual Division", your project will need to arrive at the hotel by Wednesday January 27, 2010. Address your project to:

JW Marriott Hotel
5150 Westheimer
Houston, Texas 77056 USA
Attention: Dr. Leisha Mullins, c/o USPC

***The contestant is responsible for all fees AND arrangements involved in shipping the project materials to the meeting.**

***** If you wish to have your project back, please make arrangements with someone from your region who is attending the meeting to pickup and return your project.**

**Questions? Please contact: Dr. Leisha Mullins at uspcrf2010@yahoo.com or
cell 979-255-3675**

2010 USPC Research Fair Abstract Form

Include this form with your entry

Circle Division Entered: I II III IV V	
Name:	
Project Title:	
ABSTRACT	
Summary Statement:	
Help Received	

2010 USPC Research Fair Approval Form

Include this form with your entry

Name: _____ Title of Project: _____

1) Where will you conduct your experimentation? (check all that apply)

Research Institution School Field Home Other

2) The project will involve one or more of the following and requires supervision of a Veterinarian and/or qualified scientist: (check all that apply)

Live Animal (requires Supervision by Veterinarian) Potentially Hazardous Chemicals

Potentially Hazardous Biological Agents: Microorganism rDNA Tissue

3) To Be Completed by Pony Club Member and Parent:

a) Pony Club Member Acknowledgement:

- I understand the risk and possible dangers to me from my proposed research plan
- I understand all experimental research must be done only in the presence of either an adult supervisor or qualified scientist.
- I will abide by the highest standards of the USPC during my participation in the Research Fair

Pony Club Member name

Signature

Date Acknowledged

b) Parent/Guardian Approval: I understand the possible risks and dangers involved in the research plan. I consent to my child participating in this research.

Parent/ Guardian's name

Signature

Date Acknowledged

4) To Be Completed by Adult Supervisor (can be parent): I have reviewed the research plan and have discussed the possible risks involved in the project with the participant *prior* to the start of experimentation. I have supervised the participant during the research.

Adult Supervisor's name

Signature

Date Acknowledged

5) To Be Completed by Veterinarian (required when animal used): I certify that I have reviewed this research with the participant before the start of experimentation. I certify that the experiments do not pose any adverse risk to the animals. I certify that I will provide veterinary medical treatment in case of an emergency that is related to this project.

Veterinarian's name

Signature

Date Acknowledged

6) To be Completed by Qualified Scientist: I certify that I have reviewed this research with the participant before the start of experimentation. I have a working knowledge of the techniques to be used in this project. I will ensure the participant is trained in the necessary procedures.

Qualified Scientist's name

Signature

Date Acknowledged

7) To be Completed by DC or RS: I acknowledge the participant is a pony club member in good standing in our club/region.

DC or RS's name

Signature

Date Acknowledged

