



## Riding Membership Application Form

For the year ending December 31<sup>st</sup>. 2015

To: The Secretary, Para Equestrian Ireland Ltd.

I hereby apply for riding membership of Para Equestrian Ireland Limited for the year ending December 31<sup>st</sup>. 2015 and confirm my agreement to abide by the terms and conditions of riding membership, including the provisions of the HSI Code of Conduct and Rules for Athletes.

Surname \_\_\_\_\_

First Name \_\_\_\_\_

Date of birth \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_ Mobile \_\_\_\_\_ Fixed \_\_\_\_\_

e-mail \_\_\_\_\_

As email and SMS is the preferred communication method for riding members, please ensure that both mobile phone and email address is provided.

Summary of riding experience to date

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

Name of personal trainer (if any) and details of any training completed.

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Summary of any competition you have participated in (either Para or Non-Para) during the past 12 months and summary of results obtained.

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Details of horse/horses

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I enclose

- The application form, duly completed
- Payment of 25€. (Entry fee and annual membership fee 2014)
  - (tick for junior member, membership fee = 0€)
- Medical approval form, duly completed by Dr. \_\_\_\_\_
- Copy of classification card (front and back)

I confirm having been classified on \_\_\_\_\_ Grade \_\_\_\_\_

Date \_\_\_\_\_

Signed \_\_\_\_\_