



## HSI CARRIAGE DRIVING SUBSCRIPTION APPLICATION 2017

(PLEASE WRITE IN CAPITAL LETTERS)

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

DRIVING NUMBER: \_\_\_\_\_

EQUINE PREMISES REG. NUMBER: \_\_\_\_\_

TYPE OF SUBSCRIPTION (Please tick as appropriate):

ADULT

JUNIOR\*

SUPPORTING/NON-DRIVING

\*A Junior Member is a person under 16 years on 1<sup>st</sup> January. Date of Birth: \_\_\_\_\_

*I agree that, by becoming a Carriage Driving Subscriber, I will abide by the Carriage Driving Rules and (WADA) World Anti Doping Agency as adopted from time to time by Horse Sport Ireland.*

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

**PLEASE NOTE: ANNUAL SUBSCRIPTIONS FALL DUE ON 1<sup>st</sup> JANUARY EACH YEAR & DRIVING MEMBERS' INSURANCE COVER RUNS CONCURRENTLY WITH THE SUBSCRIPTION**

### 2017 SUBSCRIPTION RATES:

ADULT DRIVER	Includes Insurance Cover	€160.00
JUNIOR DRIVER ONLY	Includes Insurance Cover	€100.00
JUNIOR DRIVER WITH ADULT	Includes 2 Insurance Covers	€220.00
SUPPORTING MEMBER	<u>No Driving Insurance</u>	€30
EQUINE ANNUAL REGISTRATION	(Please Turn Over Page)	€10.00

Please tick Payment type:

Cheque	<input type="checkbox"/>
Cash	<input type="checkbox"/>
Credit card	<input type="checkbox"/>

Card Number																				
Expiry Date																				
3 Digit Security Code																				
Card Type: Visa/Master card/ Laser																				

PROPOSER: .....

**ALL NEW MEMBERSHIP APPLICATIONS ARE SUBJECT TO RATIFICATION BY THE HSI CARRIAGE DRIVING COMMITTEE.**

Please make cheques out to **HORSE SPORT IRELAND**. When completed please return to:  
**Ms. Aileen Cartwright,**  
**HSI Carriage Driving Section, 1<sup>st</sup> Floor, Beech House, Millennium Park, Osberstown, Naas, Co. Kildare**  
[acartwright@horsesportireland.ie](mailto:acartwright@horsesportireland.ie) (045)854530

Office use only

Date received: \_\_\_\_\_ By: \_\_\_\_\_ Paid: c/c cash cheque Amount: € \_\_\_\_\_

**PLEASE TURN OVER THE PAGE**



HSI CARRIAGE DRIVING EQUINE REGISTRATION FORM 2017

**\*\*PLEASE ENSURE THAT THE NAME OF THE EQUINE IS THE NAME THAT APPEARS ON THE PASSPORT\*\***

<b>EQUINE NAME</b>		<b>EQUINE NAME</b>	
<b>TYPE</b>		<b>TYPE</b>	
<b>BREED</b>		<b>BREED</b>	
<b>GENDER</b>		<b>GENDER</b>	
<b>COLOUR</b>		<b>COLOUR</b>	
<b>PASSPORT NUMBER</b>		<b>PASSPORT NUMBER</b>	
<b>MICROCHIP NUMBER</b>		<b>MICROCHIP NUMBER</b>	

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<b>COLOUR</b>		<b>COLOUR</b>	
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<b>GENDER</b>		<b>GENDER</b>	
<b>COLOUR</b>		<b>COLOUR</b>	
<b>PASSPORT NUMBER</b>		<b>PASSPORT NUMBER</b>	
<b>MICROCHIP NUMBER</b>		<b>MICROCHIP NUMBER</b>	