

REINING SECTION OF HSI SUBSCRIPTION APPLICATION FORM 2012

(PLEASE WRITE IN CAPITAL LETTERS)

NAME: _____

ADDRESS: _____

TELEPHONE: _____

E-MAIL ADDRESS: _____

If you would like to receive your Reining information electronically (direct to your e-mail account) please tick the following box.
Any items that cannot be sent electronically will be sent to you by post in the usual manner.

TYPE OF SUBSCRIPTION (Please tick as appropriate):

		Total Cost	✓ Tick as Appropriate
Adult	General Subscription*	€130	
Adult	General & Non Pro*	€130	
Youth	General Subscription*	€85	
Youth	Non Pro*	€85	
Associate	Associate Subscription*	€75	
Associate	Youth*	€75	
Non Pro Declaration			
		€20	
Horse Registration/Licence			
		€25	
Transfer Licence (If changing horse ownership)			
		€15	
Owners (Non riding/Competing) Automatically includes membership of the NRHA, No Insurance included			
		€80	

Please note:

- ❖ A Youth Member is a person under 18 years on 1st January. Date of Birth If under 18 years of age: _____
- ❖ HSI reserves the right to apply additional charges subject to criteria laid down by the NRHA.
- ❖ Other Charges may apply for NRHA services, details on request.

***Includes membership to the NRHA and Insurance (Personal Liability and Personal Accident Insurance). Insurance is subject to terms and conditions as specified by the Insurance Underwriter.**

I agree that, by becoming a Reining Subscriber, I will abide by the Reining rules and Drug Testing Policy as adopted from time to time by Horse Sport Ireland.

SIGNED: _____ DATE: _____

PLEASE NOTE: ANNUAL SUBSCRIPTIONS FALL DUE ON 1st JANUARY EACH YEAR. REINING & WESTERN SUBSCRIBER INSURANCE COVER RUNS CONCURRENTLY WITH THE SUBSCRIPTION

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

Please make cheques payable to HORSE SPORT IRELAND. When completed please return to: Ms. Aileen Cartwright, Reining & Western Section, Horse Sport Ireland, 1st Floor, Beech House, Millennium Park, Osberstown, Naas, Co. Kildare acartwright@horsesportireland.ie

Office use only:

Date received: By: _____ Paid: c/c cash cheq Amount: _____