HSI COACH INSURANCE REGISTRATION FORM 2017



Please complete this form and send with payment and other

requirements to: Catherine Farrell

Horse Sport Ireland Beech House Millennium Park Naas, Co Kildare

| Name: | | | | |
|--|----------|---------|---|--------------|
| Address: | | | | |
| | | | | |
| Phone Home | Mobile _ | | Work | |
| E-Mail | | | Fax | |
| Level of HSI Coaching accreditation: (please tick) | | | | |
| Apprentice Coach: | Level 2: | | Level 3: | Tutor: |
| I wish to pay the Registration fee €250 (2017) | | | Required attachments: | |
| | | | Copy of HSI Coaching Certificate Or BHSAI /BHSII (<i>if required)</i> | ē |
| | | | Copy of Current First Aid Certifi Occupational First Aid or BHS Ed Specific First Aid (<i>If necessary</i>) | |
| | | | Copy of Safeguarding 1 certifica Child Protection) | te (formerly |
| | | | Copy of valid Garda Vetting/ Ac clearance letter | cess NI |
| Please give the expiry date of your First Aid Certificate/20 | | | | |
| Payment Method: | | | | |
| Cheque: | Draft: | | Credit Card: | |
| Type of Card: | VISA M | //ASTER | RCARD LASER | |
| Credit Card Number: | | | | |
| Expiry Date: Cardholder's Name: | | | Card Security Code (last 3 digits) Signature: | |
| | | | | |

IMPORTANT NOTE: ALL LEVEL 1 APPRENTICE COACHES SHOULD BE WORKING UNDER THE SUPERVISION OF A LEVEL 2 OR HIGHER QUALFIED COACH

Your insurance cover is only provided when payment is made in full and you provide copies of all relevant certificates. It is the responsibility of the individual coach to renew your First Aid and Child Protection Certificates when they expire