



## HSI CARRIAGE DRIVING SUBSCRIPTION APPLICATION 2018

(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 who is 18 years or younger 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**

### 2018 SUBSCRIPTION RATES:

<b>ADULT DRIVER</b>	<b>Includes Insurance Cover</b>	<b>€160.00</b>
<b>JUNIOR DRIVER ONLY</b>	<b>Includes Insurance Cover</b>	<b>€100.00</b>
<b>JUNIOR DRIVER WITH ADULT</b>	<b>Includes 2 Insurance Covers</b>	<b>€220.00</b>
<b>SUPPORTING MEMBER</b>	<b><u>No Driving Insurance</u></b>	<b>€30</b>
<b>EQUINE ANNUAL REGISTRATION</b>	<b><i>(Please Turn Over Page)</i></b>	<b>€10.00</b>
<b>NAMED GROOM INSURANCE</b>		<b>€40</b>

Please tick Payment type:

Cheque

Cash

Credit card

<b>Card Number</b>																					
<b>Expiry Date</b>																					
<b>3 Digit Security Code</b>																					
<b>Card Type:</b> 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. Michelle O' Reilly,**  
**HSI Carriage Driving Section, 1<sup>st</sup> Floor, Beech House, Millennium Park, Osberstown, Naas, Co. Kildare**  
[moreilly@horsesportireland.ie](mailto:moreilly@horsesportireland.ie) (045)854537

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

**PLEASE TURN OVER THE PAGE**

HSI CARRIAGE DRIVING EQUINE REGISTRATION FORM 2018

**\*\*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>	
<b>2018 CLASS*</b>		<b>2018 CLASS*</b>	

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<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>	
<b>2018 CLASS*</b>		<b>2018 CLASS*</b>	

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<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>	
<b>2018 CLASS*</b>		<b>2018 CLASS*</b>	

- Please state the class you are planning to compete with this horse in 2018