Highland Lodge Riding Club
Membership Form

Personal Details

Membership No:_____
(*Renewals only*)

Forename: _____
Surname: _____

Gender: Male ☐ Female ☐

Date of birth: _____ / _____ / _____

Address: _____
_____
_____
_____
_____

Town: _____
County: _____
Eircode: _____

Contact No: _____
Email: _____

Membership Type

New Member: ☐
Renewal: ☐
Transfer: ☐

If transfer:
State previous club: _____

Year last registered: _____

Membership Category

Riding Member: ☐
Non Riding Member: ☐

Grading Information

Dressage: _____
Show Jumping: _____
Cross Country: _____

Grading Information

Have you ever competed in any of the following and if so what level?

Dressage Ireland: Yes ☐ _____
Show Jumping Ireland: Yes ☐ _____
Eventing Ireland: Yes ☐ _____

Please indicate if you have any BHS examinations?

Stage 1 ☐ Stage 4 ☐
Stage 2 ☐ BHS II ☐
Stage 3 ☐ BHS I ☐
BHSAI ☐ FBHS ☐

Have you ever been a member of the Pony Club, if yes what examination did you pass and at what level did you compete:

D Test ☐ B Test ☐
D+ Test ☐ H Test ☐
C Test ☐ B+ Test ☐
C+ Test ☐ A Test ☐

If you have any further information that will help us to grade you at the correct level:

_____
_____
_____
_____
_____

Medical Conditions

I understand that if I have a medical condition that may affect my riding, I will inform the Club Secretary or Coach.

Insurance

All members are advised to arrange their own personal accident insurance, and horse owners to obtain third party insurance.

Volunteering

If I am accepted for membership, I agree to help the club where ever possible at club, regional and national events if required.

Privacy & Data Protection

At Highland Lodge Riding Club we are committed to respecting and protecting your privacy. The information you provide on this form will be used solely for the purposes of communicating with you as a member of this club.

As we are affiliated to the Association of Irish Riding Clubs (AIRC), your personal information will be shared with them in order to fulfil your AIRC membership benefits and/or services and they may share them with associates for the purpose of fulfilling your full membership benefits and/or services (i.e. insurance providers)

I understand that if I do not provide my personal data, my membership cannot be registered with the club and the AIRC

We / AIRC will automatically contact you about your membership, for example, to ensure you receive your membership benefits , to tell you about news, activities and events. This includes sending you email updates, information on other membership benefits, and publishing competition times and results in the public domain.

To see our privacy policy go to www.airc.ie/privacy.

Disclaimer

Horse riding is a risk sport, participation therefore holds potential danger. Horses are sometimes unpredictable and do not always respond as expected.

You may suffer serious personal injuries, as well as a loss of property as a result of exposing yourself to the risks and hazards associated with riding as a sport.

The Association of Irish Riding Clubs, their members or Agents shall not be liable for, nor shall they accept responsibility, for any injury, loss or damage howsoever sustained by any person or persons, whether arising under the express or implied terms of this contract, in negligence or a common law or in any other manner arising, whether direct or indirect and including consequential losses arising out of any of the activities of this organisation or in any other way whatsoever.

General Regulations and Conditions

If I am accepted for membership, I agree to be bound by the rules of this club and the rules of the Association of Irish Riding Clubs.

I also agree to be bound by the code of conduct for this club and also the Association of Irish Riding Clubs.

I understand that membership of the club runs from 1st January to 31st December each year.

I have read the data protection information and have given my consent, by signing below, to be contacted by the club and by AIRC for the purposes of my membership.

Signature: _____

Date: _____ / _____ / _____

Proposed By: _____

Seconded By: _____
(If required)

Parent/Guardian

To completed if the member is under 18.

Signature: _____

Date: _____ / _____ / _____

Notes

New Members:

- 1 colour passport photograph, signed on back, or suitable digital image
- Club membership fee

Return Form

Club Secretary: Niamh McAuliffe
087 9008094

Address: **Hitchmoughs Equestrian Centre, Monkstown, Cork**

Email: highlandlodge@airc.ie