



Association of Irish Riding Establishments Ltd
Beech House, Millennium Park, Osberstown,
Naas, Co.Kildare
Tel: 045-854518 Mob: 087-9500732
E-mail: info@aire.ie www.aire.ie www.gohorseridinginireland.ie

APPLICATION FOR AIRE MEMBERSHIP

Name of Establishment: _____

Name of Applicant: _____ Qualification _____

Address: _____

_____ Eircode _____

Tel No: _____ Mobile Nr: _____

Yard Manager _____ Qualification _____

Email: _____ Website: _____

Insurance Company _____ Premises Reg Nr: _____

Date of Policy: _____ from: _____ to: _____

Enclosed please find fee of € _____ to cover membership for 2019 and inspection of my Riding Establishment.

FEES: Annual Membership €350 (€25 discount for current member if paid in January)

New member: €450

Where re inspection is required within the year a fee of €200 will be charged

I understand that this inspection by AIRE is at my request and that other than the initial inspection, other inspections may take place, unannounced, on any day that my establishment is open for business. Any opinion conveyed by the AIRE Advisor is given in the knowledge, that there is no legal liability on them for anything they may say or do while on the premises. The signing of this form by me absolves AIRE and the Advisor from any responsibility whatsoever, arising out of any incident or accident at my premises whenever or howsoever caused.

I agree to accept emails from AIRE during the year. I wish to have my centre details published on www.aire.ie and www.gohorseridinginireland.ie and promotional leaflets printed by AIRE.

The Applicant, being a person, partnership or body corporate, which is the proprietor of the establishment hereby agrees, upon being admitted as an ordinary member of the Association, to be bound by all the provisions of the Memorandum and Articles of the Association.

Signed: _____

Date: _____

Print name: _____

<u>Tick</u>	<u>Category</u>	<u>Instruction Level</u>	<u>Level of Instructor required</u>
()	A1	Basic Instruction	AIRE Assessed/BHS PTT/Pony Club B+
()	A2	Riding Instruction	BHSAI/ICES or H.S.I. Level 2
()	A3	Intermediate Instruction	BHSII /IDES
()	A4	Training BHS Stage 2/PTT	BHSAI/ICES or higher
()	A5	BHSAI training	BHSII/IDES or higher
()	A6	BHSII training	BHSI or equivalent
()		BHS Ride Leader Level 2	
()		BHS Ride Leader Level 3	
()		BHS Centre Manager	
()		Therapeutic Riding Qualification	

Please ensure current FAR (First Aid) Certificate, Safeguarding 1 dated within three years and Garda Vetting from H.S.I. are available for each Instructor/Trek Leader and Yard Manager in your centre. Copies should be available on Inspection Day. Please notify the AIRE office of staff name changes throughout the year.

Activities:

()	B	Disabled Riding
()	C	Trekking
()	D	Hacking
()	E	Livery
()	F	Schooling
()	G	Facility Centre (Competitions run, X Country courses etc.)
()	H	Hunting
()	I	Trail Riding
()	J	Post to Post Trail Riding
()	K	Other _____
()	L1	Approved English Language School (ACELS)
()	L2	Provision of English Language Tuition off site (ACELS)
()	L3	Provision of English Language Tuition on site (ACELS)
()	EH	Equestrian Holidays

Additional Information required for Website

Please tick appropriate categories

Trekking/Trail Riding () Riding Instr. (BHSAI) () Basic Instruction - No Qualification ()
 Career Training/ ETB () Facility/Venue () Beach Rides () Livery ()

	<u>Tick Yes</u>	<u>Tick No</u>	Size/Amount if applicable
Indoor School	-----	-----	-----
Seating Area	-----	-----	-----
Outdoor Arena	-----	-----	-----
Lecture Hall/Meeting Room	-----	-----	-----
Canteen	-----	-----	-----
X C Course	-----	-----	-----
Accommodation on Site for Clients	-----	-----	-----
Full Time BHSAI Name	-----	-----	Year Qualified-----
Full Time BHSII or BHSI Name	-----	-----	Year Qualified-----
AIRE Assessed Personnel	-----	-----	Year Assessed-----
Eq Tourism Asst Ride Leader Name	-----	-----	Ride Leader Name-----
Eq Tourism Centre Manager Name	-----	-----	-----
H.S.I. Coaching Level	-----	-----	Name-----