

F82/18

Instructors Register Declaration of Experience Form

Applicants Name:		
Contact Number:	Email:	

utline the experience that you have attained in the area of coaching equestrian sports in no more than 200 words					

By my signature below, I certify that the above information I provided is true, accurate and complete. I also understand that any false statements or deliberate omissions on this document may be grounds for disqualification from the AIRC Register of Instructors.

Signed by: (Signature required)	
Print Name:	
Date:	

This form must be accompanied by a reference from one of the following:

- Horse Sport Ireland Tutor
- Horse Sport Ireland Level 2 Coach or higher
- BHS II or higher