A.I.R.C.
Association of
Irish Riding Clubs

Reference: F52/14
Issued: 19/03/2014
Amended:

Show Summary Report Form

Show Information	
Organising Club or Region:	

Show Name:	
Date of Show:	
Venue:	

Show Officials:			
Event Secretary:		**Contact No:**	
Safety Officer:		**Contact No:**	
Course Designer (if required):		**Contact No:**	
Technical Delegate (if required):		**Contact No:**	

Class Name:	Discipline:	Judges Name:	No of Entries:

Signed: _____ **Date:** _____

Club Secretary ***(Not printed)***

Please complete all fields and return to National Office within 14 days of your show taking place.