



Irish Coastal Rowing Federation Ltd.

# Registration Form

1. Use this Form for **First Time Registrations, Registration Renewals, Club Transfers** and for **Lost Card Replacements** and indicate below which one applies.
2. Please write in **CLEAR BLOCK LETTERS**. Forms submitted with unreadable writing will be returned Unregistered and the ICRF will accept no responsibility for any loss or convenience caused to the applicant as a result of not being registered.
3. Please include **2 Passport Size Photographs** with your **NAME** and **CLUB** clearly written on the reverse of each.
4. Please include your **Birth Cert**, which will be returned to you after scrutiny by your **Association Registrar/Secretary**. This does not need to be sent to the ICRF Registrar. Photocopies are NOT Acceptable.
5. Please include the Appropriate Registration Fee ( €10.00 )
6. For **Adults**, Registration is valid for 5 years. For **Applicants Under 18 of age**, Registration is valid for 3 years.
7. The completed form must first be sent to your **Association Registrar/Secretary** for verification of form and documentation.
8. Send the **Completed & Verified Form, 2 Photos & Fee** to ICRF Registrar, remember, the Birth Cert should not be sent to the ICRF Registrar, this can be retained once the Association Registrar/Secretary has scrutinised it.


Nature of this application (Tick ✓ One):

First Time Registration  Renewal  Club Transfer  Lost Card Replacement

In the event of a  
**Club Transfer Application**,  
Name of Previous Club:

Previous  
**ID Card Number**  
(if known) (in all instances):

Name:	Club: <b>Rowing Club</b>
Address:	Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>
	Date of Birth:
	Home Association:

	Do you hold a current and up-to-date Code of Ethics Certificate? Yes <input type="checkbox"/> No <input type="checkbox"/>	If <b>Yes</b> , please enter the Certificate No. here:

<p><b>To be Signed by the Applicant:</b></p> <ul style="list-style-type: none"> <li>I wish to apply to the Irish Coastal Rowing Federation to be registered as a member of the above stated club and I Agree to be bound by the Rules, Policies and Decisions of the Irish Coastal Rowing Federation, its Officers &amp; Authorised Representatives.</li> <li>I am familiar with the ICRF <b>Code of Ethics and Good Practice for Children in Irish Coastal Rowing</b> and I agree to be bound by the Code and all of its requirements and aims.</li> </ul>	<p><b>To be Signed by the Assoc. Secretary/Registrar:</b></p> <ul style="list-style-type: none"> <li>I Certify that this Applicant is a Member the above named club</li> <li>I confirm that the Date of Birth supplied above is correct according to the documentation supplied to me and which I have examined and I am satisfied with its authenticity.</li> <li>I hereby propose the applicant for Registration with the I.C.R.F.</li> </ul>
Signed: <b>Applicant</b>	Signed: <b>Assoc. Secretary/Registrar</b>
If the applicant is under 18 years of age, a Parent or Legal Guardian must sign.	
Date:	Date:

## For ICRF Registrar's Use Below this Line

Date Rec.:	Reg. No.:	Expiry Date:	Code of Ethics No. on Card: Yes <input type="checkbox"/> No <input type="checkbox"/>	Code of Ethics Cert. No.:
Signed: <b>ICRF Registrar</b>			Date:	