



# EVENT REGISTRATION FORM

To be completed by the organising club and submitted, along with the appropriate registration fee, to the **IOA Fixtures Secretary, to arrive by relevant deadline.** For further info, email: [fixtures@orienteering.ie](mailto:fixtures@orienteering.ie)

**ORGANISING CLUB** \_\_\_\_\_ **DATE** \_\_\_\_\_ **OPEN / CLOSED** (Circle One)

## MAP

Name \_\_\_\_\_ Signs from \_\_\_\_\_  
 Code \_\_\_\_\_ Grid ref \_\_\_\_\_  
 Address \_\_\_\_\_ Registered to (Club) \_\_\_\_\_  
 County \_\_\_\_\_ Authorised by \_\_\_\_\_

Grid reference of the parking or registration area; **6-figure grid-reference mandatory.**  
 If not registered to the organising club; enter the name of the official of the registered club who authorised use of this map.

## EVENT

Name & Series No. \_\_\_\_\_ Starts from \_\_\_\_\_ to \_\_\_\_\_  
 Type / Format \_\_\_\_\_ Pre-entry (Y/N) \_\_\_\_\_

<b>Event Category</b> (circle one):	C1	C2	C3	C4	CC		
<b>Registration Category</b> (circle one):	R1	R2	R3	R4	RC	RU	RX
	€120	€80	€40	€20	€20	€60	€20
<b>Event Number</b> _____	No. of events registered by club so far for season starting 1 <sup>st</sup> Aug (incl. this one)						
<b>Late Surcharge (€25):</b> Add to total if event is registered late (subject to acceptance) <b>Total: €</b> _____							

## OFFICIALS / STATEMENTS

Organiser \_\_\_\_\_ Club \_\_\_\_\_  
 Planner \_\_\_\_\_ Club \_\_\_\_\_  
 Controller \_\_\_\_\_ Club \_\_\_\_\_  
 Entry Secretary / Public Contact \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_ Website \_\_\_\_\_

**I certify that access permission has been or will be obtained from the following** (circle all that apply):

- a) Forest Owner/s                      b) Land Owner/s                      c) Commonage Owner/s

Signed (Club Secretary) \_\_\_\_\_ Date \_\_\_\_\_

I understand and accept the mandatory insurance requirement that adequate first-aid measures and a risk management plan (as specified by the IOA) must be in place for this event and hereby indemnify the IOA and its Executive of any consequences of this club's failure to produce and provide same.

**This club undertakes to make the safety of all involved the highest priority at all times.**

Signed (Club Secretary) \_\_\_\_\_ Date \_\_\_\_\_

## OFFICIAL USE ONLY

Approved by IOA Fixtures Secretary (Y/N) \_\_\_\_\_ Correct Fee Received (Y/N) \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Full rate event ( ) of ( ) Discounted rate event ( ) of ( )