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THE N.A.R.G.C. COMPENSATION FUND

Application for Special Protection

Applicant Body: _____ RGC Area: _____

Proposed Event/s: _____

Scheduled Date/s: ____/____/201____. ____/____/201____. ____/____/201____. ____/____/201____.

Starting Time: _____ Comments (if any): _____

Address for Event/s: _____

Name of Person Applying: _____ Phone No: _____

Address: _____

Position in Club: _____ Date of Application: ____/____/201____.

This Application Form, together with a remittance of €15 Event/Day should be in the possession of the National Fund Administrator at least Seven (7) days in advance of the proposed event or, in the case of events not specifically listed in the Fund Contract, Thirty (30) days before the proposed event.

Applications which are received late will not be accepted.

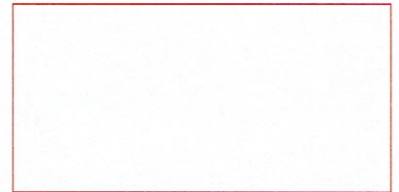
Official Use

I hereby certify the event as described above, may be conducted as stipulated and the protection of the N.A.R.G.C. Compensation Fund will apply in accordance with the Terms, Exceptions and Conditions of the Fund Contract.

Your County Safety Officer has been notified of this event and may attend. Instructions given, if any, should be followed carefully in the interests of safety.

Signed: _____

National Fund Administrator



Registered Event Number: _____

For Official Use

I hereby certify that I have attended the above event and was satisfied with the safety measures undertaken by the Club. In so doing, I encountered _____ klms travel and hereby claim my expenses.

Signed: _____
County Safety Officer