



The Irish Cob Society (ICS28)

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APPLICATION TO AFFILIATE TO THE IRISH COB SOCIETY (ICS)

TO BE COMPLETED IN BLOCK CAPITALS

Name of Organization: _____

Address Organization: _____

Telephone No.: _____ Email _____

Mobile No: _____ Website _____

Name of Contact Person: _____

Phone: _____ Email: _____

I to abide by the RULES FOR ICS AFFILIATION as laid down on 30th January 2009.

Signature of Contact Person _____

Date _____

ICS OFFICE USE ONLY

Application Decision Details _____

ICS Official Signature
and stamp _____

Evelyn Flynn – Secretary

Date _____