

# ATHLETIC ASSOCIATION OF IRELAND



## PRIMARY SCHOOLS LICENCE APPLICATION FORM

19 Northwood Court,  
Northwood Business  
Campus,  
Santry,  
Dublin 9  
Phone: 01 886 9933  
Email: [deirdremarley@athleticsireland.ie](mailto:deirdremarley@athleticsireland.ie)  
Web: [www.athleticsireland.ie](http://www.athleticsireland.ie)

**AAI athletes may compete only in events which has been sanctioned by the Athletic Association of Ireland**

**Please ensure all aspects are completed before submitting to AAI**

**Details of Applicant for all Categories**

Name of Club: \_\_\_\_\_

Name of School: \_\_\_\_\_

Date of Event \_\_\_\_\_ Start Time \_\_\_\_\_ Venue \_\_\_\_\_

Type of Event                      Cross Country                      Track & Field

Email Address & Phone Number to which the Licence should be sent to: (this information will also go on our fixtures list)

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Fee attached:                      Cheque                      Postal Order                      Cash

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**Primary Schools Licence**

**Fees: € 40 - up to 500 participants who must be on a school's register**

Applications must be made through a local club in the area of the event, and then approved by the County Board.

**Insurance is covered under this permit application**

**Guarantee:**

We guarantee that the event will be organised and conducted in accordance with the Rules of the Athletics Association of Ireland.

Signed \_\_\_\_\_ Date \_\_\_\_\_  
   Club Authorised Signatory

Signed \_\_\_\_\_ Date \_\_\_\_\_  
   School Signatory

Athletics Ireland Affiliated Club Secretary \_\_\_\_\_ Date \_\_\_\_\_

Telephone \_\_\_\_\_ Mobile \_\_\_\_\_

Email Address \_\_\_\_\_

This application has been sanctioned by the \_\_\_\_\_ County Board

Signed \_\_\_\_\_ Hon. Sec.                      Date \_\_\_\_\_



## **Medical Requirements**

1. What medical cover will you have on hand for the day? (Red Cross, St John Ambulance, Civil Service etc?)

\_\_\_\_\_

2. What level of qualifications will these personnel have? What level of service will they provide?

\_\_\_\_\_

3. Will they have facilities to cope with dehydration?

\_\_\_\_\_

4. Will there be an ambulance present and necessary personnel to convey a person to hospital if required?

\_\_\_\_\_

5. Do you have access to a defibrillator?

\_\_\_\_\_

6. Where will the medical personnel be situated around the course? Will there some medical personnel on bicycles depending on the nature of the course and terrain (Road races)?

\_\_\_\_\_

Please return completed application form and appropriate fee to:

Deirdre Marley, AAI Office, 19 Northwood Office, Northwood Business Campus , Santry, Dublin 9

AAI Office use only: Licence Number

## **AAI Primary School Licence**

### **Primary Schools permits are offered under the following conditions:**

- 1 Clubs will be limited to two Permits per year, one Cross Country & one Track & Field.
- 2 Applications must come through the affiliated club.
- 3 Prizes may be given on the specific date of the permitted event.
- 4 No qualification to further events.
- 5 **If it is the intention to hold a finals day, a separate insurance policy will be required.**
- 6 Maximum participation of 500 only.
- 7 More than 500 entrants, please contact McMahon Galvin, our insurance Brokers 01-8363326 for further details.
- 8 Compliance with AAI distances.
- 9 **In the event of Property Damage there will be an excess of €500.**
- 10 All advertisements etc shall incorporate either: [a] Under AAI Rules: [b] Sanctioned by AAI: [c] Approved by AAI.
- 11 **Organisers must ensure that a medical plan is in place for all events.**