

**YOU MUST REGISTER WITH BOS BEFORE COMMENCING MOUNTAIN LEADER TRAINING.
BEFORE YOU CAN REGISTER YOU MUST COMPLETE THE FOLLOWING REQUIREMENTS.**

REGISTRATION REQUIREMENTS

1. Successfully complete a BOS Mountain Skills Assessment.
2. Hold a current Basic First Aid / REC 2 Certificate
3. Part 1 of this Registration Form must be completed by the Course Director of your Mountain Skills Assessment.
4. Be a paid-up Member of the MCI (individual member or member of club affiliated to MCI). See Part 2: Application for Registration for ML Scheme.

- On registration, candidates will be issued with a Log Book and may commence training under the Mountain Leader Scheme.
- Please contact BOS for a list of providers currently approved to run ML Training.

REGISTRATION FORM FOR MOUNTAIN LEADER SCHEME

PART 1: Report of Mountain Skills Assessment (To be filled in by COURSE DIRECTOR)

Name of Candidate _____

Date of Mountain Skills Assessment ____ / ____ / ____.

Location _____

The above

- Met the prescribed standards for skills and knowledge during the Mountain Skills Assessment
- Produced satisfactory evidence of the appropriate level of hillwalking experience
- Presented a basic First Aid / REC 2 Certificate:

Qualification _____ Expiring on ____ / ____ / ____

Comments _____

Signed _____

Name of Course Director (BLOCK CAPITALS)

MCI OFFICE USE ONLY

PART 2: Application for Registration for the ML Scheme (To be filled in by the APPLICANT)

Name _____

Address _____

Telephone _____ (daytime) _____ (mobile)

Email: _____

Date of Birth ____ / ____ / 19 ____ (Note: min. age for ML reg. is 18)

Are you currently a member of the MCI? Yes No

If Yes, MCI Membership No. _____
(Check back of MCI Membership Card for your Membership Number)

If No, please include (discounted) MCI Membership Subscription of €30 when returning this Application, along with €35 ML Registration Fee – Total €65.

Are you currently registered with BOS for any other training Scheme Yes No

If yes, BOS Registration Number _____

Are you involved in a mountaineering club/ youth club / organisation Yes No

If yes, please provide group name(s) _____

Reasons for undergoing ML Training _____

Signature _____ Date ____ / ____ / ____

Please return completed Form with Appropriate Fee(s) to:

Mountaineering Council of Ireland
SportHQ, 13 Joyce Way,
Park West Business Park
Dublin 12.
Tel: 01-625 1115 Email: mci@eircom.net

ENCLOSURES CHECKLIST (Please indicate what you are enclosing) .

ML Registration Form

MCI Membership Subscription (€30)

ML Registration Fee (€35) Total amount enclosed: € _____

Cheques should be made payable to the MCI.