

**THIS IS AN IMPORTANT DOCUMENT.  
PLEASE RETAIN A COPY ON FILE FOR FUTURE REFERENCE**



**READING FOR FUN  
SCHOOL APPLICATION INFORMATION**

**Every Visiting Volunteer Team registered with Irish Therapy Dogs:**

- Has been Garda vetted on behalf of Irish Therapy Dogs.
- Is insured by Hiscox Insurance Company against third party risks in the course of their visits.
- Is rigorously assessed and approved for suitability to visit in a positive and discreet manner.
- Has two character references from non-related referees.
- Adheres to Irish Therapy Dogs' Guidelines.
- Adheres to Irish Therapy Dogs' official dress code.
- Observes Fire, Health and Safety regulations of the School.
- Respects confidentiality.
- Maintains control of their dog.
- Should be accompanied by School Staff at all times
- Dog is vaccinated and preventively treated for parasites.
- Dog will wear official Irish Therapy Dogs' coat, lead and collar.

**For Further Information Please Contact:**

**Irish Therapy Dogs  
2 – 4 Merville Road  
Stillorgan  
County Dublin  
A94 E3F8**

**Phone: 01 544 6198  
Web: [irishtherapydogs.ie](http://irishtherapydogs.ie)**



## READING FOR FUN SCHOOL APPLICATION FORM

**Please Complete in BLOCK CAPITALS**

**School Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Telephone Number:** \_\_\_\_\_ **Official Mobile Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Children Catered For:** \_\_\_\_\_

**No. of Pupils:** \_\_\_\_\_

**Telephone Number** \_\_\_\_\_ **Official Mobile Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**School Principal:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_ **Official Mobile Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Class Teacher:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_ **Official Mobile Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Signed:** \_\_\_\_\_ **Date :** \_\_\_\_\_

An Annual Subscription of €100 is payable to Irish Therapy Dogs on placement of a Volunteer Visiting Team

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