

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



CARE CENTRE 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 carry out their visits 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 Care Centre.
- Respects confidentiality.
- Maintains control of their dog.
- Will not carry out any staff duties.
- Dog is vaccinated and preventively treated for parasites.
- Dog will wear official Irish Therapy Dogs' coat, lead and collar.

***Irish Therapy Dogs,
2-4 Merville Road
Stillorgan
Co. Dublin A94 E3F8
Telephone: 01 5446198
www.irishtherapydogs.ie***

Company Registration No. 464658

Charity Registration No. CHY 18715

Registered Charity No. 2007239

December 2021

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CARE CENTRE APPLICATION FORM

Please Complete in BLOCK CAPITALS

Care Centre Name: _____

Address: _____

Postal Code: _____

Telephone Number: _____ Official Mobile Number: _____

Email Address: _____

Persons Catered For: _____

No. of Residents: _____

Director of Nursing: _____

Telephone Number: _____ Official Mobile Number: _____

Email Address: _____

Activities Co-Ordinator: _____

Telephone Number: _____ Official Mobile Number: _____

Email Address: _____

Signed by
Director of Nursing _____ Date: _____

An Annual Subscription of €200 is payable to Irish Therapy Dogs on placement of a Volunteer Visiting Team

Please return this form to:
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