



## Registration Form

# Aoibhneas Children's Centre Architectural Competition

### Competitor Name(s)

\_\_\_\_\_  
(First Name) (Family Name) (Qualification of Competitor)

\_\_\_\_\_  
(First Name) (Family Name) (Qualification of Competitor)

\_\_\_\_\_  
(First Name) (Family Name) (Qualification of Competitor)

**Practice Name / Organisation** \_\_\_\_\_

**Address** (in the case of an entry made by a team, please provide the address of the first person listed above who will be registered as team leader)

\_\_\_\_\_  
\_\_\_\_\_

**Country** \_\_\_\_\_ **VAT Reg No** (if applicable) \_\_\_\_\_

**Email** \_\_\_\_\_ **Tel No** \_\_\_\_\_

**Fax No** \_\_\_\_\_ **Mobile No** \_\_\_\_\_

Registration Forms will only be processed upon receipt of the Registration Fee of €121.00 (inclusive of VAT at 21%). Paid by: Laser  Visa  Mastercard  Cheque  Euro Draft  EFT  (please attach proof of payment for EFT). All cheques should be made payable to RIAI.

**Name and address of cardholder if different from above**

\_\_\_\_\_

**Card No** \_\_\_\_\_ **Expiry Date** \_\_\_\_\_

All information available to registered competition entrants for the **Aoibhneas Competition** is to be used for the purposes of the competition only and no other use of this information is permitted. I/we have read the above and agree to comply fully with this requirement.

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

Electronic Funds Transfer information as follows:  
RIAI Acc No: 10053149; Bank: Bank of Ireland, College Green, Dublin 2;  
IBAN: IE34BOFI90001710053149; BIC: BOFIE2D  
Payment details must include: 'Aoibhneas Competition'