



IRISH FARRIERY AUTHORITY LTD.

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IRISH FARRIER REGISTER

REGISTRATION FORM

Title: **First Name:** **Surname:**

Home Address:

.....

Work Address:

.....

Phone (Home):

Phone (Work):

Mobile:

Fax:

E – mail:

Website

Qualifications: RF DipWCF AWCF FWCF

Membership: IMFA WCF FRC NAFBAE AFA EFFA