

CLONTARF FOOTBALL CLUB MEMBERSHIP APPLICATION FORM 2014-2015

Please complete in block capitals

Completed application forms should be returned to the Hon. Secretary at the address below.

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Surname		First Name			
Home Address		Business Address			
Email address		Date of birth			
Mobile No.		Telephone no.			
Playing Position		Previous School/Club			
I hereby apply to become a member of Clontarf Football Club as outlined below. By signing, I and the people named on this application agree to be bound to the rules of Clontarf Football Club and the Code of Ethics of Youth & Mini Rugby where applicable including acceptance of all written notifications from the Club by electronic means. I consent to Clontarf Football Club retaining and using the data provided in this form for the administration of the membership for the above named people.					
Signature		Date			
Proposer		Seconder			
Single Membership	Please $\sqrt{\text{Relevant Box}}$ Type Subscription (Monthly x 12) Playing €180 (S/O €15.50 per month) Pavilion €180 (S/O €15.50 per month) Country €85 (S/O €7.50 per month) Over 65 €85 (S/O €7.50 per month) Student €85 (S/O €7.50 per month) Under 21 €85 (S/O €7.50 per month) Mandatory Redeemable ClubCard Levy €50	Family Membership Details of the members and players covered by this Family membership should be added on the next page	Please √ Relevant Box Type Subscription (Monthly x 12) 1 Adult & 1 Yth/Mini €235 (S/O €20 pm) □ 1 Adult & 2 Yth/Mini €275 (S/O €23 pm) □ 1 Adult & 3 Yth/Mini €300 (S/O €25 pm) □ 2 Adults & 1 Yth/Mini €370 (S/O €31 pm) □ 2 Adults & 2 Yth/Mini €420 (S/O €35 pm) □ 2 Adults & 3 Yth/Mini €455 (S/O €38 pm) □		
otes			Mandatory Redeemable ClubCard Levy €50		
This application must be proposed and seconded by two members of Clontarf Football Club, one of whom must be a member of the Executive Committee. An applicant will not be considered a member until the application has been approved by the committee.		4. Family membership is currently only available where one or more Youth & Mini player(s) is to be registered. 5. Youth & Mini membership is available up to U19 level. 6. A maximum of 2 Adult members from the same family are allowed under the Family Membership category 7. Mandatory Prepayment Levy			

and the appropriate subscription paid or bank instruction completed. 3. Cheques should be crossed and made payable to Clontarf Football Club.			must be paid with Annual Sub – this may be used in the club shop & bar					
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	Family Member Detail (The person named on the page AGMs & EGMs)		as Adult 1 and will be the contact p	erson for all matters rela	ated to this family mem	bership application and will hold	the right to vote at	
AGINIS & EGINIS)			Name		Mobile No.		email Address	
	Adult 2 (If applicable)							
	Youth & Mini P	Player details						
	(It is allowable to have more Standing Order)	e than 3 Youth & Mini Players fron	n the same Family on a Family Mer	mbership – the fee for ea	ach addition player is €	•	n if paying by	
	Name	Date of Birth	School		Conditions	Renewal/New Member	Age group (Office Use Only)	
						RENEWAL		
						NEW MEMBER		
						RENEWAL		
						NEW MEMBER		
						RENEWAL NEW MEMBER		
						RENEWAL		
						NEW MEMBER		
						RENEWAL NEW MEMBER		
-						NEW MEMBER		
PAYMENT DETAILS		Card:- Visa	Mastercard	Visa Debit Laser				
Payment must include the €50 Mandatory Club Card Levy Payment Method: Please √ Relevant Box Charge Cook PolitiCredit Cord			Card No:-					
			Evn Dato:	Exp Date:				
Cheque Cash Debit/Credit Card								Lxp Date.
	Standing Order	(Complete Bank Instruction	ns overleat)	M	MYY			

Standing Order Instruction

1. The Manager	4. Your instruction to the Bank and Signature				
Bank	Please pay the following to the Account of Clontart Football Club Account Number 12556643, Sort Code 93-10-55, AIB, 37 Upper O'Connell Street, Dublin 1				
Address (Full Address)	An annual payment of \in , payable immediately and thereafter annually on 1st July				
	OR				
	A monthly payment of \in , payable on the 1 st of each month.				
••••••••••••					
	This instruction hereby cancels any previous Standing Orders made payable to Account No. 12556643 ONLY				
	Signatures				
2.Name of Account	5. Account Number:-				
•••••••••••					
3. Sort Code:-	Address				
	D 4				
	Date:				
	Day Month Year				