



Application for membership

Member Details

	Name (Block Capitals)	Date of Birth*
1.	_____	____/____/____
2.	_____	____/____/____
3.	_____	____/____/____
4.	_____	____/____/____

* Please Note: New members under 18 years must supply two copies of their birth certificate with this application.

Contact Details

Home Address	Phone Numbers	eMail Address(es)
_____	Home: _____	_____
_____	Mobile: _____	_____
_____	(In case of emergency & occasional text message reminders)	(For the sole purpose of issuing club updates and reminders)

Relevant Medical Conditions – please include details of any medical conditions that exist or any regular medication taken by any of the members listed above, about which we should be aware.

The annual membership fee includes payment of each athletes insurance and registration fees for County, Provincial and National organisations to which the club is affiliated. It also includes entry to certain competitions to be decided by the management committee. The membership fee is €120 for the first family member, €50 for the second, €30 for the third and there is no charge for subsequent family members.

By signing this application, each member is agreeing to be bound by the membership guidelines and constitution of Le Chéile AC, the code of ethics & good practice for children's sport in Ireland and to follow instructions from club coaches.

Signature of Parent / Guardian: _____

Date: _____