

Finn Valley Athletic Club.

Application for Membership 2007 -2008

Please complete & return to reception with the relevant fee.
Membership is not effective until full fee is paid.

Name: _____

Address: _____

EMAIL/Telephone No: _____ Date of Birth:

Category:

JUVENILE MEMBERSHIP	€ 40.00
SENIOR MEMBERSHIP	€100.00
FAMILY MEMBERSHIP	€125.00

Family Membership

1st Child _____ DOB _____ 2nd Child _____ DOB _____

3rd Child _____ DOB _____ 4th Child _____ DOB _____

Details of any Health Problems: _____

Signed: _____

For Office Use Only.

Membership Proposed by: _____

Seconded by: _____

Amount Received: _____

Received By: _____ Date: _____

MEMBERSHIP NO: _____ Expiry Date: _____