



## RAHENY SHAMROCK ATHLETIC CLUB

*Affiliated to Athletics Association of Ireland*

### Membership form 2019

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ County of Birth: \_\_\_\_\_

School (if juvenile) \_\_\_\_\_

Home Phone No.: \_\_\_\_\_ Mobile Phone No.: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Any Medical Conditions? \_\_\_\_\_

If yes, please inform your Coach.

\_\_\_\_\_

Are you: (a) Existing Member  or (b) New Member

Have you been a member of an Athletics Club previously?

If so please state which Club \_\_\_\_\_

#### **SUBSCRIPTIONS:**

Individual Juvenile Member U13 (Manor House Group only) €75

Individual Juvenile Member U14-U19, Junior U20, Student €90

Individual Senior/Masters Member €100

\*Family Membership: (Please list other family members) €180

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

*\*Note: Family membership maximum 4 people – 2 adults & 2 children/1 adult & 3 children/4 children. The relevant individual subscription must be paid for each additional family member.*

#### **Please tick one of the following:**

I would like to receive information via text or email from the Club or AAI to keep me informed about details of meetings, events, competitions and other information related to my membership.

OR

I do not want to receive any information via email or text from the Club or AAI.

If accepted, I agree to abide by the rules of the club. I also understand that the club, its coaches, its members and committee shall not be held responsible for any accidents or injuries sustained by me, from my cause whatsoever or however arising, or for any property mislaid or stolen in the club or its environs. I agree to allow photographs and videos of myself in training and competition to be taken occasionally and posted to the Club's website.

Applicant's Signature \_\_\_\_\_ Date: \_\_\_\_\_

**One Life, One Club**