

MEMBERSHIP APPLICATION - RENEWAL FORM

PLEASE USE BLOCK LETTERS

Renewal: Please Quote Ref. From Journal Address Label.....

Application for Membership for Year Commencing: September 2017

NAME:

ADDRESS:

.....

Eircode/Post Code

.....

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E-MAIL..... D O B if under 21.....

Area	Rate	
DUBLIN AREA (Residing within 32 Km. radius of G.P.O)	€60.00	<input checked="" type="checkbox"/>
DUBLIN AREA (Under 21)	€45.00	<input type="checkbox"/>
REPUBLIC OF IRELAND (Excluding Dublin Area)	€40.00	<input type="checkbox"/>
EUROPE & OVERSEAS	€50.00	<input type="checkbox"/>
UNITED KINGDOM & NORTHERN IRELAND	£30.00	<input type="checkbox"/>
ARREARS/OTHER PAYMENTS		<input type="checkbox"/>
TOTAL		<input type="checkbox"/>

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