

**BALLYVAUGHAN FANORE WALKING CLUB**  
**Membership Application Form**  
**1<sup>st</sup> November 2009 to 31<sup>st</sup> October 2010**

**Membership Fees 2009/2010.**

**Please mark chosen membership:**

- MI/Club Membership €45
- Club Membership €35
- Member of another MI Club €20
- Youth/Child under 18yrs €15      Date of Birth if under 18yrs\_\_\_\_\_

**Name**\_\_\_\_\_

**Address**\_\_\_\_\_

**E-mail**\_\_\_\_\_

**Telephone**\_\_\_\_\_ **Mobile**\_\_\_\_\_

**Emergency Contact Name**\_\_\_\_\_

**Emergency Contact Telephone Number**\_\_\_\_\_

**\* Please have emergency number in your phone under ICE 1 & ICE 2**

**For other MI Club Member Only**

**Club Name**\_\_\_\_\_ **MI No.**\_\_\_\_\_

**Conditions of membership**

I agree to comply with the Club Constitution and any other guidelines, best practices and codes of conduct issued by the Club Committee.

Signed:\_\_\_\_\_ Date:\_\_\_\_\_

**Please note -**

- \* Payment will only be accepted with completed application forms.**
- \* Please clearly mark chosen membership.**