



## C.L.G. Domhnach Mór/Cill Dhéagláin

Killeland West, Ashbourne, Co Meath  
Fón: 01 8499140, www.donashgaa.com

## Membership 2016

(Rates on next page)

Full name of applicant or Parent/Guardian in case of all members U18

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

Addr : \_\_\_\_\_

\_\_\_\_\_

Ph home: \_\_\_\_\_ Mobile \_\_\_\_\_

eMail addr: \_\_\_\_\_

Membership types:

( Family membership, Adult PlayerU23+, Adult PlayerU19-U22,  
Juvenile U7 + Guardian(NP\_V), Juvenile U8-U18 + Guardian(NP\_V), Additional Juvenile  
Adult Non-player\_Voting(NP\_V), Couple\_NP\_Voting(NP\_V), Social Member(NP\_NV),  
Senior Citizen(>=65)\_Voting, Senior Citizen\_Non\_Voting(NV), Ten year family )

Add Lotto option Y/N:  ( + Lotto rates on next page)

Would you be willing to volunteer in the club?

Please indicate Y/ N:

**Adult (Over 18) Membership** (Please provide details of playing & non playing adults(including guardian) applying for Membership)

Name	Mobile	eMail address	Adult player team(s);	Date of birth (adult player)	Non player adult - tick

**Juveniles (to U18) Membership** (Please provide details of all children to be registered)

Name	M/F	Date of birth	Juvenile Team(s)	School

By providing these details you consent to receive email or text communication from Donaghmore Ashbourne unless you tick 'opt out' option here:

OPT OUT Option:

I hereby apply for Membership of C.L.G. DomhnachMór/Cill Dhéagláin for the individuals listed above. I grant parental/guardian consent for all Juvenile Members listed above to join the Club. The above applicants agree to uphold the Club Rules and Code of conduct (see club website). I consent to the information above being stored in electronic form for sole use of the club and the GAA. I enclose herewith the appropriate membership fees for 2015. All membership to be ratified by the Executive Committee.

Total enclosed € \_\_\_\_\_

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

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