Cumann Lúthchleas Gael Youth Membership Application Form

| Ainm/Name: | |
|--|--|
| Seoladh/Address: | |
| Phone/Fax/Email (if available): | |
| Date of Birth: Day Month | Year (e.g. 06 02 90) |
| I hereby apply to: Club for | Membership |
| of the above Club and Youth Membership of Cum (The Gaelic Athletic Association) | |
| I subscribe to and undertake to further the aims a Club and of Cumann Lúthchleas Gael (The Gaeli and to abide by its Rules, and I attach herewith th membership fee as determined by the above Club | and objectives of the c Athletic Association), e appropriate |
| Sínithe/Signed Dáta: | |
| Print Name: | |
| Parent(s)/Guardian(s), on behalf of the above na We/I consent to the above Application and to une Applicant. | |
| Sínithe/Signed: (Parent/Gua | ardian) Dáta |
| Print Name: | |
| Signature of Full Member Proposing New Member | r |
| | Date |
| Print Name | |
| Signature of Full Member Seconding Proposal | |
| | Date |
| Print Name | |
| For Official Use only: | |
| Youth Membership Application approved by Club Exec | utive on Dáta |
| Sinithe: Club 1 | Runaí. |
| Registered in Central Membership Database on | |
| Membership Identification Number: | |

Upon election, your membership details will be entered on the G.A.A. Membership database in accordance with Rule 2.2. This information will be used by the G.A.A. for the purpose of administration only.