

Cumann Lúthchleas Gael

Full Membership Application Form

Ainm/Name: _____

Seoladh/Address: _____

Phone/Fax/Email (if available): _____

Date of Birth: |__| Day |__| Month |__| Year (e.g. 06 02 65)

I hereby apply to: _____ Club for Membership
of the above Club and Membership of Cumann Lúthchleas Gael (The Gaelic
Athletic Association)

I subscribe to and undertake to further the aims and objectives of the Club and of
Cumann Lúthchleas Gael (The Gaelic Athletic Association), and to abide by its
Rules, and I attach herewith the appropriate membership fee as determined by
the above Club.

Sínithe/Signed _____ Dáta: _____

Print Name: _____

For Official Use only:

Membership/ approved by Club Executive on _____ Dáta

Sínithe: _____ Club Runaí.

Registered in Central Membership Database on _____

Membership Identification Number: _____