



Moy Valley Athletic Club Membership Application Form 2018

Athlete's Surname: _____

First name: _____

Date of birth: ___/___/_____

Gender: Male Female

Address: _____

Landline: _____ Mobile No.: _____

E-mail: _____

Please tick if club officials need to be aware of any Health Issues/Disabilities/Allergies:
Yes No

If "Yes", please specify: _____

Contact details in the event of an emergency

Name of doctor to be contacted	Number:
Emergency contact (1) name	Number:
Emergency contact (2) name	Number:
Emergency contact (3) name	Number:

Membership fees 2018 – One member €50; Two members in family €90; Three members in family €120; Each additional family member €25

Payment method: Cash Cheque

Family members must all complete individual forms. For all those under 19, a parent/guardian must sign for them.

Signature: _____

Date: ___/___/_____

Do you consent to your child's image to be sent to local papers, used on the Moy Valley AC Facebook page and/or website.

Please tick: Yes No

Do you agree to abide by the Moy Valley AC policies that can be read/downloaded at www.moyvalleyac.ie.

Please tick: Yes No

Club Secretary: Lorraine McNulty 087-6327483

Club Registrar: Ann Fox 087-6316099

Email: moyvalleyac@gmail.com