

## Membership fees

### SEE WEBSITE FOR ALL MEMBERSHIP OPTIONS AND ENTITLEMENTS

Membership Type	Players	Non Players
<b>Youth (Under 18) / Student in Full Time Education – subject to Max €300</b>		
1 <sup>st</sup> Youth/Student	€120	
2 <sup>nd</sup> Youth/Student	€ 80	
3 <sup>rd</sup> Youth/Student	€ 50	
4 <sup>th</sup> Youth/Student	€ 50	
<b>Adult Membership Options</b>		
Adult	€150	€ 75
Adult Unwaged	€ 120	
Committee Member and Mentors		€ 20
Temporary/Social		€ 20
Senior (65+)		€ 10
<b>Long Term Member</b>		
Player	€ 50	

### Family Options – Available where 2 Non Playing Adults (Parents/Guardians) register with their Youth(s)/Student(s) (savings in brackets)

No of Youths/Students in full time education	2 Adults – Full Membership	2 Adults – 1 Full membership and 1 Committee, Mentor, Temporary/Social	2 Adults Both Committee, Mentor, or Temporary/Social
1 Youth/Student	€ 230 (-40)	€ 190 (-25)	€ 150 (-10)
2 Youth/Students	€ 310 (-40)	€ 270 (-25)	€ 230 (-10)
3 Youth/Student	€ 360 (-40)	€ 320 (-25)	€ 280 (-10)
4 or more Youth/Students	€ 410 (-40)	€ 370 (-25)	€ 330 (-10)

**Payment** Amount:  Method: Cash or Cheque

Please return completed form with payment to your team manager/mentor or to Alison Emanuel, Registrar, c/o BSJ Clubhouse, Grange Road, Dublin 16

### Official use only

Player/s registered   
System updated

Any queries contact Alison –  
mobile no. 087-623 3576 or  
email: alisonemanuel@eircom.net



Ballinteer St. Johns GAA Club

Membership 2017

www.ballinteerstjohns.com

Please complete all appropriate sections.

Mobile numbers and email addresses are needed for communication purposes.

Family Name	<input type="text"/>
Home phone no.	<input type="text"/>
Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

### Important notice

By submitting this Membership Form all those named herein (adults, children, and parents/guardians on behalf of children where appropriate) are making the following declarations:

- 1) I / we shall adhere to the Code of Best Practice in Youth Sport (Our Games Our Code) and all BSJ's policies, codes and procedures (available on BSJ's website).
- 2) In the event of illness or injury, I /we give permission for medical treatment to be administered where considered necessary by a nominated first aider, or by qualified medical practitioners.
- 3) If I /we cannot be contacted and my child(ren) needs emergency hospital treatment, I/we authorise a qualified medical practitioner to provide emergency treatment and/or medication.
- 4) I /we shall disclose any information regarding medication, allergies or conditions which may impact on my child(ren)'s welfare or behaviour while participating in club games or activities by submitting a Medical / Special Needs form (available on our website).
- 5) I/we give permission for photographic images of my child(ren) to be used by the club to promote and/or celebrate club activities and events.
- 6) I/we will ensure that one parent or guardian of my child(ren) will remain at Nursery and supervise my child(ren) during all Nursery sessions.

To assist us in our administration and record keeping and to ensure that you receive club information please use **BLOCK CAPITALS** and ensure that all information is legible.

Key: M/F = Male/Female; F = football; H/C = Hurling/Camogie

Membership application - Children and Students in full time education							PLEASE PRINT DETAILS	
Surname	Forename(s)	M/F	D.O.B. dd/mm/yy	F	H/C	School	If over 18 only	
							Mobile No.	Email address

  

Parents/Guardian details and consent for children's (under 18) membership and participation in club activities				
Surname	Forename	Signature (minimum of one signature required)	Mobile Number	Email address

**PLEASE PRINT DETAILS**

Adult Membership application (excluding Students in Full Time Education) * Adult membership types: Player, Mentor, Committee, Adult, Family option, Social, Senior 65+									
Surname	Forename(s)	Signature	M/F	D.O.B (if player)	F	H/C	*Membership Type	Mobile No.	Email address

<b>New Adult Member – all new adult members must provide the name of a proposer and seconder who are existing members of BSJ</b>	
Proposer name (print):	Signature:
Seconder name (print):	Signature:

**Note: Mentors must be Members and must comply with Garda Vetting requirements.**