**Wellington Irish Society**

**New Membership Application**

Please complete and return this application to the Irish Society accompanied with the appropriate fee.

Please circle the appropriate membership type

Adult / Family/ Pensioner

**New Member Details**

|  |  |
| --- | --- |
| Title (Mark one) | Mr/Mrs/Miss/Ms |
| First Name |  |
| Family Name |  |
| Address |  |
|  |
|  |
| Phone Number |  |
| Email Address |  |

Please mark Yes or No to the following

I would be interested in doing bar duty at the club Yes/No

I’m available to help out in club activities if needed Yes/No

**Authorisation**

|  |  |  |  |
| --- | --- | --- | --- |
| Details | Proposer | Seconder | Nominee |
| Name |  |  |  |
| Signature |  |  |  |
| Date |  |  |  |

**Membership Fees 2017**

**Adult $20, Family $40, Pensioner $10**

Please return the form to membership@wellingtonirishsociety.com

Bank account details 06-0513-0058515-00. Please use your name as reference.