



COILL AN CHLOCHAIR ΠΑΘΗ ΜΗΥΙΡΕ / CEAPACH

Full Membership Form 2017 (£30)

Name _____

Address: _____

Tel No. (Home) _____ (Mobile) _____

Email Address _____

I hereby apply to Coill an Chlochair Naomh Mhuire CLG for Membership of the above Club and Membership 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 Club.

Print Name _____

Signature _____ Date _____

Proposed by _____

Signature _____ Date _____

Seconded by _____

Signature _____ Date _____

For Internal Club Use Only

Membership Approved: _____ (Runai) Membership No: _____

CHAIRMAN: Peter O'Kane Tel. 07760330570 SECRETARY Brendan Harkin Tel. 07825271800



Killyclogher GAA received the sum of £30 for the 2017 Membership of _____

Signed on behalf of the Committee _____