



Cláirseacha na Sceirí

Cumann C.L.G. agus Camógáfochta Chláirseacha Na Sceirí

(SKERRIES HARPS G.A.A. and Camogie Club)

DUBLIN ROAD, SKERRIES, CO. DUBLIN



2018 Membership Form

Club fees for the year 2018 are now due. The rates are as follows: -

Membership

- | | |
|---|------|
| 1. Family (covers 2 adults and all children 17yrs & under*) | €160 |
| 2. Adult | €80 |
| 3. Youth (up to 17yrs) | €60 |
| 4. Social Membership (non-playing, non-participation, no voting rights) | €50 |
| 5. Senior Membership (65's and Over) | €35 |

*Also covers family members over 17 and under 21 in **full time** education.

Mandatory Player's Injury Fund Contribution

- | | |
|----------------------------|-----|
| 1. Adult | €50 |
| 2. Youth (17yrs and under) | €20 |

The Mandatory Injury Scheme does not seek to compensate fully for injury but to supplement other Schemes such as Health Insurance. Ultimately, the responsibility to ensure that adequate cover is in place lies with the individual member.

Membership must be received in full by 31st March. Players membership fees must be received before playing or training in 2018.

Application cannot be processed until Privacy Information section is completed on reverse of this form.

Membership Renewal: New:

Type of Membership (Family, Adult, Youth or Social) _____

Adult Member(s) _____

Youth Names (please include D.O.Bs) _____

Proposed By (for Social Membership only) _____

Address _____

Contact Telephone _____ E-mail _____

Membership Fees € _____ Injury Fund Contributions € _____

Total Subscription € _____

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.

Signed _____

(Note - where players are 17 or under this form MUST be signed by Parent or Guardian)

IMPORTANT – Please complete reverse of this form. Application cannot be processed until both sides of the form have been completed.

PRIVACY INFORMATION:

- I understand the personal data on this form (“Personal Data”) will be used by the Club and the GAA for the contractual purpose of registering (or re-registering) and maintaining my Membership.
- I understand that the Personal Data will be retained by the Club and the GAA for such period as my Membership subsists.
- I understand that I can resign my Membership by writing to the Club or the GAA and my Personal Data will then be erased.
- I understand that my Personal Data will also be used for administrative purposes to maintain my Membership including registrations, teamsheets, referee reports, disciplinary matters, Injury Reports, transfers, sanctions, permits and for statistical purposes.
- I understand that if I do not provide my Personal Data my Membership cannot be registered with the Club and the GAA.

Sínithe/Signed _____

Dáta: _____

Print Name: _____

I have read the important Data Protection information as provided with this form and have given my consent, by ticking the boxes and signing below, for my information to be used as follows:
(Please tick as appropriate)

(1) To provide me with updates regarding Club activities such as matches, meetings and club events

(2) To provide me with details of Club fundraising activities including Lotto, social occasions, ticket sales etc

(3) I am aware that my photograph or video image may be taken whilst attending or participating in games or activities connected with the Club and I consent to it being used by the Club for items like match programmes, year books, match reports, event reports or on the Club website or social media channels.

I understand that I can withdraw my consent at any time by writing to the [Club or the GAA].
I understand my rights under Data Protection legislation, as outlined on the reverse of this form

Sínithe/Signed _____

Dáta: _____

Print Name: _____

(Note - where members/players are 17 or under this form MUST be signed by Parent or Guardian)