



Riversdale Sports Club
26a Glasnevin Avenue, Dublin 11
Membership Application Form

Name: _____

Address: _____

Telephone No.: _____

Tick here if you do **not** wish to
be part of club text group _____

Email: _____

Membership fees: (please tick appropriate membership category)

Adult-€80.00

Family-€110.00

Junior-€35.00

For Family Membership please list names of playing members, with dates of birth for Juniors:

Name: _____ DoB: _____

Name: _____ DoB: _____

Name: _____ DoB: _____

Name: _____ DoB: _____

I hereby consent to the use and storage of my or my family's details as outlined above both in paper and electronic format for the purpose of club management.

Signed: _____ Date: _____

Fees are payable by bank transfer to:

IBAN: IE30IPBS99060380022030 BIC:IPBSIE2D

Please enter your name in the reference section of the bank transfer.

New Members please include a supplement of €15 for club keys. This will be returned if you are not renewing your membership when you return the keys.

Completed form to be returned to the Secretary, Riversdale Sports Club.