



Riversdale Sports Club
26a Glasnevin Avenue, D11 N7 65

Membership Application Form

Name: _____

Address: _____

Telephone No.:

_____ **Email:**

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

Membership fees: (please tick appropriate membership category)

Adult- €80.00 Family- €110.00 Junior (Age 14-17) - €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.

Membership is for the calendar year – January 1st to December 31st.

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