



Cumann Lúthchleas Gael-Shannon Gaels GAA
Underage Player/Youth Membership Application Form 2018

UNDERAGE PLAYER / YOUTH DETAILS

AINIM	
NAME	
SEOLADH/ADDRESS	
HOUSE PHONE NUMBER	
MOBILE PHONE NUMBER FOR PARENT	
DATE OF BIRTH	
Any medical conditions that we need to be aware of	

I apply to **Shannon Gaels GAA** Club for Membership of the Club and Youth Membership of Cumann Lúthchleas Gael (The Gaelic Athletic Association). I subscribe to undertake to further the aims and objectives of the Club and of The Gaelic Athletic Association and to abide by its Rules including the Code of Practice for Youth in Sport. I attach the appropriate membership fee as determined by Club

Underage players Signature	
Print name	
Date	

We/I consent to the above Application and to undertakings given by the Applicant. We/I consent to the receipt by our child of texts relating to Shannon Gaels from the person authorised within the Club to contact them regarding the activities of the Club and to the taking and using of photographs in accordance with Club policy.

Parents Signature (s)	
Print name (s)	
Date	



For Official Use only:	
Registered in Central Membership Database on	
Membership Number	
Player (Yes or No)	
Team (U16, U14, U12)	
Membership Paid (Yes or No)	
Amount Paid	

Membership rates:

Adult (over 18) €30,

Full time student €20,

Under 18 €15,

Under 10 €10

Families (2 parents and all children under 18) €75.