

## Membership application form – R of I

### Personal Details

Title \_\_\_\_\_ Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

2<sup>nd</sup> name if Joint \_\_\_\_\_

Date of Birth \_\_\_\_\_

Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Eircode \_\_\_\_\_

Tel: \_\_\_\_\_

Mob: \_\_\_\_\_

Email: \_\_\_\_\_

### If Group:

Name of Group: \_\_\_\_\_

Group Leader: \_\_\_\_\_

### Type of Membership

Category	€
Individual	66
Joint ( <i>two people at one address</i> )	112
Family ( <i>two adults and their children Under 17 (at one address)</i> )	143
Under 17	31
Concessionary*	51
<i>* Aged 17-24, Unwaged, Senior 65+, Country Sports Employee</i>	
Supporter/Coursing Supporter	20.50/25.50
Courtclough Member	50

### Groups

Groups	€
<i>*a group is 7 or more people with correspondence to Group Leader only</i>	
Gun Club Group (per person)	51
Equine/Hunt Groups	56
<i>(Additional charge of €5.00 pp for membership cards to be issued to individual addresses)</i>	
Affiliate membership (clubs and associations)	143

### Angling Membership

	€
Angling - individual	25.50
Angling – Group* <50/>50	16.50/14.50
<i>Additional charge of €5.00 pp for membership cards to be issued to individual addresses)</i>	

### Data Protection

Countryside Alliance Ireland operates strict data protection policies. Your details will be kept secure and will not be passed to any third party without your consent.

### Payment Details

Total amount payable € \_\_\_\_\_

\* Payment by cash/cheque

\* Pay by direct debit – *if you wish to set up a direct debit, please phone us to request a form.*

\* Payment by credit/debit card



VISA	Mastercard	Delta/Maestro/Laser
Card number:		
3 digit security code – last 3 digits above signature on reverse of card:		
Expiry date:	Issue No:	
Issue date:		
Name as it appears on card:		
Amount payable:		

### Application and Payment Authorisation

Applicants under 17 require the signature of a parent or legal guardian.

Signature \_\_\_\_\_

Date \_\_\_\_\_

CAI USE ONLY (Processed by) \_\_\_\_\_

# Personal details of Group/Family Members *(please use block capitals)*

*\*Dates of birth must be included for members under the age of 17\**

Title _____ Full Name _____ Date of Birth _____ Address _____ _____ _____ Eircode _____ Telephone _____ Mobile _____ Email _____	Title _____ Full Name _____ Date of Birth _____ Address _____ _____ _____ Eircode _____ Telephone _____ Mobile _____ Email _____
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**Countryside Alliance Ireland, Courtlough Shooting Grounds, Balbriggan, County Dublin  
Tel: 01 690 3610 Email: [membership@caireland.org](mailto:membership@caireland.org)**