Irish Motor Caravanners' Club

Application for Associate Membership 2020

PLEASE WRITE CLEARLY IN BLOCK CAPITALS

Lead Member **2nd Member**

SURNAME: _____ **SURNAME:** _____

FORENAME: _____ **FORENAME:** _____

ADDRESS IN FULL	**CONTACT DETAILS**	
	Mobile Phone	
	Land Line	
	e-mail	
Postcode		

I consent that I am giving the above information to the Irish Camping Car Club Clg., trading as the IMCC for the purposes of my Membership of the club. I understand that the information supplied by me will be held in accordance with the timeframe for meeting the club's operational requirements and its obligations under Irish Company Law. **PLEASE TICK TO CONSENT** ☐

ASSOCIATE MEMBERS UNDERTAKING: I hereby agree that I have read and agree to abide by the Constitution and Code of Conduct of the Irish Motor Caravanners Club (IMCC). ***TICK BOX TO CONFIRM*** ☐

SIGNED: _____**Lead Member** **SIGNED:** _____**2nd Member**

Date : _____ **Date:** _____

NAME OF PROPOSER (Block capitals): _____

SIGNATURE OF PROPOSER: _____

MEMBERSHIP NUMBER OF PROPOSER: _____

Please note proposer must be fully paid up Full Member of greater than 2 years and must be known to you personally. ***N.B.: Only fully completed applications will be processed. Subject to Committee Approval***

PLEASE RETURN TO: Pat Butler, 60 Weston Road, Churchtown, Dublin 14 *Eircode* D14 CV04
Tel.: 087-6778094 (After 7.00 p.m.)

PLEASE DO NOT SEND CASH AND COMPLETE ALL SECTIONS