Cairde na Cruite
Membership Form (Renewal)

Ainm / Name: _____

Seoladh / Address: _____

Teileafón / Phone: _____ Mobile: _____

Email: _____

Dáta / Date: _____

Please tick as appropriate:

Cash:	__	Student: (10 euro)	__
PO/Cheque:	__	Individual: (20 euro)	__
Standing Order:	__	Family: (30 euro)	__

Payment is due on 1st January each year. Receipts are not posted unless requested.

Please return to:
Cairde Na Cruite, c/o Orla Belton, Goat House, Dublin Road, Thurles, Co. Tipperary, Ireland.

Email: orla_belton@yahoo.co.uk

Standing Order

From (Insert Name and Address of Bank):

_____

_____

Name (Capitals): _____

Bank Account Number: _ _ _ _ _ _ _ _

National Sort Code: _ _ - _ _ - _ _

Commencement date:_____ On the first day of each year, commencing 20___ until 20___ please pay the sum of _____ euro to the Bank of Ireland, Main Street, Dundrum, Dublin 14 for credit to Cairde na Cruite Account No. 10582665 branch code 90-10-95. Total number of payments _____.

Signed: _____

Date: _____