

# Celtic/DCH Athletic Club

## Application/Registration Form

December '23 – December '24

Name: \_\_\_\_\_

Surname: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date Of Birth: \_\_\_\_\_

County/Country Of Birth: \_\_\_\_\_

Home Phone No. \_\_\_\_\_

Mobile Phone No. \_\_\_\_\_

Email Address \_\_\_\_\_

Signature of Parent/Guardian or Athlete if under 18: \_\_\_\_\_

Signature of athlete if over 18: \_\_\_\_\_

***N.B Any athlete who has a medical condition that may be brought on or aggravated by exercise or physical activity should notify their coach before commencing training.***

**Fee :** - €55 for new members

- €40 for renewals

- Family of 3 or more €115. Membership fee includes registration and insurance

- Cheques are payable to 'Celtic Athletic Club'. Fees can also be transferred via Revolut to Mary.

**Please complete this form and return it to any of the coaches as soon as possible.**