



Membership Application Form 2024

Please Tick

Adult Membership	€130	<input type="checkbox"/>
Family Membership <i>(Parents / Guardians plus any under 16's)</i>	€190	<input type="checkbox"/>
Student Membership (up to age 23) <i>(Must produce valid college student card)</i>	€80	<input type="checkbox"/>
Under 16 Membership <i>(Parent Guardian details required)</i>	€40	<input type="checkbox"/>
Associate Membership <i>(Registered member of PPI affiliated club)</i>	€100	<input type="checkbox"/>

Personal Details

Name	Date of Birth (U18 / U23 only)	Gender
PPI Registration #		
PPI Handicap		
Parent / Guardian (U18 only)		
Address	Contact Details	
	Mobile #:	
	Home #:	
	E-mail #:	
	Parent / Guardian #:	

FAO Parent / Guardian of U18

Does your child have any illness / medication that you want the club to be made aware of; you can inform a member of the committee or provide information below.

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NEW MEMBERS

Signature:	New Member <input type="checkbox"/>
Date:	
	Golf handicap / PPI handicap
Proposed by:	Club Member
Seconded by:	Committee Member

SIGNATURE BLOCK (renew membership)

Signature:	Existing Member <input type="checkbox"/>
Date:	