

# Membership application

Dublin/Wicklow branch



Please return this form with your subscription to:  
59 Cois Culainn, Loughlinstown, Co Dublin.  
Any queries to [contact.meitheal@gmail.com](mailto:contact.meitheal@gmail.com).

Surname \_\_\_\_\_

Forename: \_\_\_\_\_

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

Phone no. (home): \_\_\_\_\_

Phone no. (work): \_\_\_\_\_

\* Phone no. (mobile): \_\_\_\_\_

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

\* Date of Birth: \_\_\_\_\_

\* If the above details have been sent to Mountaineering Ireland through another club, the details on this application MUST be the same.

For insurance purposes, are you a member of Mountaineering Ireland? Yes  No

If yes, Mountaineering Ireland Membership number

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If your membership is through a club (rather than individual membership) please state which one?

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Please state any relevant experience you bring to  
*Mountain Meitheal* (e.g. engineer, forester, farmer,  
previous trail experience, .)

\_\_\_\_\_

\_\_\_\_\_

The activities of Mountain Meitheal can involve risk of personal injury or death. Volunteers should be prepared to accept such risks when volunteering and take responsibility for their own safety.

I wish to apply for membership of *Mountain Meitheal* and enclose my subscription of **€20** and agree to support the aims and objectives of the club.

Signed \_\_\_\_\_

Date \_\_\_\_\_