



Membership Application Form

Please complete in Block Capitals

Completed Application Form should be returned to Killorglin Sports & Leisure Centre, Langford Street, Killorglin, Co. Kerry

Personal details:

Spouse/ Partner details if applicable

Title: _____

Title: _____

Name: _____

Name: _____

Address: _____

Home phone number: _____

Mobile: _____

Mobile: _____

Emergency contact name: _____

Emergency contact number: _____

Membership Prices (please indicate membership option): Senior - €25 Family (Parents + all u/18) - €40 Junior (u/18) - €10

junior 1 details

Name: _____

Date of birth: _____

ALLERGIES: _____

junior 2 details

Name: _____

Date of birth: _____

ALLERGIES: _____

Junior 3 details

Name: _____

Date of birth: _____

ALLERGIES: _____

junior 4 details

Name: _____

Date of birth: _____

ALLERGIES: _____

Method of payment (please tick)

Postal Order: _____ Cheque / Draft (Payable to **Killorglin Sports Complex**): _____ Cash: _____

I have read the K.S.L.C Terms and Conditions of Membership and I agree to comply with them

Signature: _____

Signature: _____

FOR JUNIOR MEMBERSHIP A PARENT MUST SIGN (junior applicants aged over 7 must also sign)

Date: _____ MEMBERSHIP YEAR RUNS ANNUALLY FROM OCTOBER 1ST - without exception an extra charge of €1 per visit/activity will be applied to lapsed/non members.

Office Use:

Membership No: _____

Total Received: _____ Date of Joining: _____ MS card issued: Y/N

How did you find out about The Sports Centre? Passing by / Word of mouth / Website / Friend (Please specify): _____