

Irish Canadian Club of Hamilton

389 Concession Street, Hamilton, ON L9A 1B8

Phone: 905-389-3222

APPLICATION FOR MEMBERSHIP

DATE: YR__MO__DD__ TYPE OF MEMBERSHIP: FAMILY__ SINGLE__

LAST NAME: _____ FIRST NAME _____

ADDRESS: _____

CITY: _____ P/C _____ PHONE: _____

E-Mail _____

PLACE OF BIRTH: _____ COUNTY: _____ COUNTRY: _____

SPOUSE'S NAME: _____ PLACE OF BIRTH: _____

CHILDREN('S) (NAME & AGE): _____ (____), _____ (____),
_____ (____), _____ (____).

IF YOU OR YOUR SPOUSE WERE NOT BORN IN IRELAND, SPECIFY BASIS OF IRISH ANCESTRY, IF ANY:

RELATIONSHIP: _____ PLACE OF BIRTH: _____

Optional Information

Year Born: _____ Interest/Hobbies: _____

Are you interested in:

Playing:- Ladies Snooker (Wed Ev.) _____ Ladies Golf (Wed Ev.) _____

Men's Snooker (Fri Ev.) _____ Singing in Men's choir _____

Irish Dancing _____ Irish Language Class _____

Volunteer Bar Duty _____ Serving on Executive _____

Signature: _____

Referred by (member) _____

CLUB USE:

Approved by Executive: _____ Membership Type: _____

Member Advised: _____ Payment Received: _____

Correspondence Secretary Advised: _____