

Family Name

Email Address

Mobile No.

Ballinteer St. Johns GAA Club - Membership 2021

Office	Office Use		
SM			
GAA			
LGFA			
С			
Р			
M			

€

Email & mobile numbers are required for communication purposes - Please use BLOCK Capitals when completing this form

Total Payment

Address			Pav	ment Method	,
Home Phone				(Cash / Cheque / Online)	
			(Cas	sii / Cileque / Ollillie)	
Family membershi	ip details				
	Member 1	Member 2	Member 3	Member 4	
Surname					
First Name					
Date of Birth					
School (under 19 c	only)				
Mobile (over 18s o	only)				
Email (over 18s or	nly)				
Please state team i	f player/ mentor (eg. U14,	Nursery 2014, Senior Camogie	etc)		
Football (male)					
Hurling					
Camogie					
Ladies Football					
All children must h	nave a parent or guardian v	who is a member of the club.			
Parent/Guardian N	ume 2 nd Parent/Guardian				

Members or Parent(s)/Guardian(s), on behalf of the above named:

- We/I consent to the above Application.
- We/I understand the personal data on this form will be used by the Club and the GAA for the contractual purpose of registering (or re-registering) and maintaining the Applicant's Membership.

Email Address
Mobile No.

- We/I understand that the Personal Data will be retained by the Club and the GAA for such period as the Applicant's Membership subsists.
- We/I understand that I can resign the Applicant's Membership by writing to the Club or the GAA and their Personal Data will then be erased.
- We/I understand that the Applicant's Personal Data will also be used for administrative purposes to maintain their Membership including club and team administration, registrations, teamsheets, referee reports, disciplinary matters, Injury Reports, transfers, sanctions, permits, covid health forms and for statistical purposes.
- We/I understand that if I do not provide the Applicant's Personal Data their Membership cannot be registered with the Club and the GAA.

	I		
Signed:		Date:	

I have و	given my consent, by tickir	ng the boxes and signing below, for my \slash our information to be ι	e used as follows:	
(Please	(2) To provide me with det(3) I am aware that my chi	dates regarding Club activities such as games, training, meetings a tails of Club fundraising activities including Lotto, social occasions, ild's photograph or video image may be taken whilst attending or p r items like match programmes, year books, match reports, event re	ns, ticket sales etc r participating in games or activities connected with the Club and I consen	nt to it
		ny consent at any time by writing to the Registrar at Ballinteer St Jo Protection legislation, as outlined later on this form	Johns GAA Club.	
	Adults and children should	code of behaviour (see link below) and agree to the principles set of the principles set of the sections for adults or children as appropriate ohns.com/wp-content/uploads/2017/04/CodeofBehaviourUnderage	et out in the Code when participating, playing or attending our Gaelic Gam ragePDFBooklet.pdf	ies.
Sínithe,	/Signed:	(Parent/Guardian if under 18) Date:		
How ca You hav What a You hav your co Where Further the web How do Should the follo	re the right to request a cop re my privacy rights relating re the right to have your Per nsent to processing - You ca can I get further information information regarding your posite www.dataprotection.ie o I make a complaint or repr you wish to make a compla powing email address: info@	rsonal Data updated, rectified, or deleted if you so wish. You have to an do so by contacting us. on? r rights can be obtained through the Office of the Data Protection of e oort a breach? hint or report a breach under in relation to your Personal Data, you	nis information will be provided to you within one month. We the right to object to your Personal Data being processed and to withdr On Commissioner, Canal House, Station Road, Portarlington, Co. Laois, or ou can do so by emailing the Office of the Data Protection Commissioner of	· on
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	oser name(print):		Signature	
I Saco	nder name(nrint)	· · · · · · · · · · · · · · · · · · ·	Signature	1