



PATRON: Michael D. Higgins, PRESIDENT OF IRELAND
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Affiliation Form 2022

Guidance Notes

- Please enter the full name of your ARA, the area you recruit members from, the venue you meet at and the frequency of your meetings.
 - Please enter the total number of members you are affiliating at this time.
 - Please enter the details of your committee. Even if there has been no change from last year, it is important that you re-confirm these details so we can check our records and make sure we have the correct details.
 - Please enter the full names and addresses, including Eircode, of your committee, no abbreviations or initials (This helps us reduce the number of duplicate members on our system).
 - We encourage the secretary to provide an email address if at all possible as it speeds up communication and reduces the amount of paper used.
 - Each affiliated Active Retirement Association may nominate one person as an **Appointed Company Member**, to represent the group at the Annual General Meeting of the organisation with full voting rights. Should the Appointed Company Member be unavailable to attend the Annual General Meeting, they may appoint a proxy to take their place.
 - Please sign and date the form, giving your position on the committee.
- *Under GDPR Guidelines, we will only use this information for the purposes of communicating with you on membership matters. We will not share your information with any third party unless, in the case of your ARA secretary where it is for potential new members to your ARA.**

Thank you for affiliating and for sharing in the active retirement experience.

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New A.R.A?

Yes

No

1. Name: _____

2. Area Served: _____ Eircode: _____

3. Total number of Members: _____

4. Venue of meetings: _____

5. Frequency of meetings: _____

Chairperson: _____

Full Postal Address: _____

Eircode: _____ Telephone: _____ Email: _____

Secretary: _____

Full Postal Address: _____

Eircode: _____ Telephone: _____ Email: _____

Treasurer: _____

Full Postal Address: _____

Eircode: _____ Telephone: _____ Email: _____

Appointed Company Member: _____

Full Postal Address: _____

Eircode: _____ Telephone: _____ Email: _____

I confirm that all details are correct:

Signed:

Position:

Date:

Fee Amount Included:

For Office Use Only			
Action	Date	Amount	Signed
Received by National Office			
Updated			
Relevant documents & cards sent			