

Membership Form 2024 (New & Renewing Members)



A.R.A Name:

A.R.A Number:

PLEASE FILL IN ALL FIELDS

No	First Name	Surname	Gen.	Mobile/Landline	New Member (Y/N)	Renewing Member (Y/N)	New Card (Y/N)	Member of another ARA? If Yes, Please specify the ARA	Payment amount
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									

Payment Method (Please tick): Cheque

Bank Transfer

Secretary Signature:

Date:

TOTAL:

Completed paperwork can be posted to our Head Office or emailed to info@activeirl.ie

If paying by bank transfer **Please INCLUDE YOUR A.R.A. NAME AS REFERENCE:** BOI, College Green, Dublin 2, IE28 BOFI 9000 1794 1296 56

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.