



## ASSOCIATE MEMBERSHIP APPLICATION FORM

Title: Mr/Mrs/Miss/Ms  
Name: .....  
Address: .....  
.....  
Postcode: .....  
Landline: .....  
Mobile: .....  
Email: .....

*I agree to become an Associate member of the Suffolk Sheep Society - South of Ireland Branch and to abide by its Articles of Association and the Byelaws and any other rules and regulations from time to time adopted by the Society*

Signature: .....  
Date: .....

### **Subscriptions**

Subscriptions are due 1<sup>st</sup> January every year, prices included within Application.  
Subscriptions will be collected by Direct Debit

**Please return completed forms to :** Suffolk Sheep Society – South of Ireland,  
Kirriemuir, Ballygawley, Co Sligo, F91 E8P2

**Membership Information on the Suffolk Sheep Society Website**

The information provided is held on the Suffolk Sheep Society – South of Ireland Branch database and will appear on the member pages on the Irish Suffolk Sheep Society website.

I/We confirm the details are correct

I/We accept that this information will be posted on the Irish Suffolk Sheep Society/Suffolk Sheep Society websites

**OR**

**I/We do not give consent** for our name to appear on the web site

Signed: ..... Date: .....

**Schedule of membership payments**

**Inclusive of Vat at 23%**

Adult Annual Subscription	€105.00
Youth Annual Subscription (up to 16 years on 31 <sup>st</sup> July)	€ 20.00
Young Adult Annual Subscription (up to 26 years on 31 <sup>st</sup> July)	€ 40.00
Associate Annual Subscription	€ 50.00

**Direct Debit**

All new members must pay by direct debit. Please enclose your completed direct debit form with your application form

