



MEMBERSHIP FORM

Drumcondra Education Centre, Drumcondra, Dublin 9, IRELAND.

Email: iatsemembership@gmail.com

Name: (Block Capitals) _____

School Address: _____

Mailing Address: (if different to School Address above) _____

Email: _____

Occupation: _____

Special Education Area: _____

Please tick the appropriate box below:

New Member

Renewal

I enclose a cheque for: €40 for Full Membership - (*Cheques payable to IATSE*)

Signature: _____

Date: _____

Return to Membership Secretary, IATSE, Education Centre, Drumcondra, Dublin 9.