Celtic/DCH Athletic Club

Application/Registration Form

November '26 – November '27

Name: _____

Surname: _____

Address: _____

_____

_____

Date Of Birth: _____

County/Country Of Birth: _____

Home Phone No. _____

Mobile Phone No. _____

Email Address _____

Signature of Parent/Guardian or Athlete if under 18: _____

Signature of athlete if over 18: _____

N.B Any athlete who has a medical condition that may be brought on or aggravated by exercise or physical activity should notify their coach before commencing training.

Fee : - €65 for new members

- €50 for renewals

- €200 for family of 4+

- Membership fee includes registration and insurance

- Cheques are payable to 'Celtic Athletic Club'. Fees can also be transferred via Revolut to Mary.

Please complete this form and return it to any of the coaches as soon as possible.