

BOGTROTTERS HILLWALKING CLUB



MEMBERSHIP FORM

Please use block letters

Name: _____

Address: _____

Date of Birth: _____

Home phone: _____ **Mobile:** _____

E-mail: _____

Emergency Contact Person

Name: _____ **Contact No.:** _____

I hereby apply for membership of the Bogtrotters Hillwalking Club (the 'Club'). I accept that I undertake all club walks and activities on my own account and at my own risk, and confirm that the club bears no responsibility to me for any injuries arising in the course of my participating in Club walks and activities.

Full Membership:

I note and accept that as part of the full membership fee (€45) I will be enrolled as a member of Mountaineering Ireland (MI). Details of my MI Membership benefits and insurance cover provided etc can be viewed at: www.mountaineering.ie.

Associate Membership:

I note and accept that as part of the reduced membership fee (€10) I will not be registered as a member of Mountaineering Ireland (MI) and confirm that I have my own Insurance cover.

Signature _____

Date: _____

Membership type (please tick One Only)

Full Membership.....€45

Associate Membership....€10 Current MI Number _____

Please return to Bogtrotters Hillwalking Club.

C/O Claire Hyland,
The Haven,
Old Bohilla Lane,
Kilmacanogue.
Co Wicklow.

Cheques payable to Bogtrotters Hillwalking Club

Bank details : BIC ULSB IE 2D / IBAN IE68 ULSB 9850 4503 1130 80 – please put your name in the narrative and e-mail the secretary and Treasurer (adrian.kelly@esb.ie)