

No Name Club Limited

AFFILIATION FORM for LOCAL CLUBS

PART 2 (MUST BE RETURNED BY 30/10/10)

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| <p><i>Office Use Only:</i></p> <p>Date Received: _____</p> <p>Attached Financial Report etc. Yes _____ No _____</p> <p>Sanctioned by: _____ Date: _____</p> |
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- This form is to be completed **in full** by the Chairperson and Secretary and returned to the No Name Club Office, 32 Main Street, Newbridge, Co Kildare **by 30/10/10**

Incomplete forms will not be accepted!

- It is very important that it is filled neatly and clearly (use block capitals if possible).

Part 2 of Affiliation forms must reach the National Office **no later than** 31st **October 10**

- **It is very important to note that any undue delay in returning the Affiliation Form etc. will render your insurance invalid i.e. your club/members will be unable to take part in or run any events under the auspices of the No Name Club until the Affiliation form is received**

HOSTS & HOSTESSES

Any changes to the following list during the year must be reported to the Office immediately as they take place to ensure compliance with our Insurers!

Number of Hosts & Hostesses selected for training:

Male: _____

Female: _____

(If you have any queries please ring the Office on 045 435444)

N.B: Keep a photocopy of this Affiliation form for your records!!

HOSTS & HOSTESSES

(Please print names clearly - National membership cards will be issued for each Host & Hostess listed):

Any changes to the following list during the year must be reported to the Office immediately as they take place to ensure compliance with our Insurers!

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Please Note:

End of Year Certificates will only be issued to Hosts & Hostesses that have been listed on this form.

Any requests for these certificates must be made at least two weeks prior to your club's Presentation night.

N.B: Keep a photocopy of this Affiliation form for your records!!

