



Adult Volunteer Application Forms



I wish to apply for membership of The _____ No Name Club.
(Club Name)

I agree with the main objective of The No Name Club Limited, under whose auspices the Club operates, which is to generate a responsible attitude towards alcohol and provide positive alternatives to it.

I am willing to help advance the objectives and to abide by the Club Rules.

Name: _____

Address: _____

e-mail: _____

Signed: _____

Telephone _____

Landline: _____

Mobile: _____

Date: _____

Have you been or are you now a volunteer of another Organisation/Youth Group Y____ N____

Please give details:

Name of Group	Contact person Phone & Address	Dates involved
		From: To:

Referee 1

Name: _____

Address: _____

Phone: _____

e-mail: _____

Referee 2

Name: _____

Address: _____

Phone: _____

e-mail: _____

These forms must be returned to the office:

No Name Club Ltd.
Main Street
Baltinglass
Co Wicklow
Tel: 0596400299
Fax: 0596481990



(A copy should also to be kept on file by the Club Secretary)