



IRISH AMERICAN COMMUNITY CENTER  
 NEW HAVEN GAELIC FOOTBALL & HURLING CLUB  
 9 VENICE PLACE, EAST HAVEN, CT 06512-1428  
 (203) 469-3080



APPLICATION FOR MEMBERSHIP

Two members in good standing shall recommend applicant. Application must be accompanied by initiation and membership fees before it can be processed. All members are required to abide by the Constitution and By-laws of the Club.

Please Print:

Name \_\_\_\_\_  
 Spouse \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip+4 \_\_\_\_\_  
 Telephone (Home) \_\_\_\_\_ E-Mail \_\_\_\_\_ @ \_\_\_\_\_  
 Children's Name \_\_\_\_\_ Age \_\_\_\_\_  
 Name \_\_\_\_\_ Age \_\_\_\_\_  
 Name \_\_\_\_\_ Age \_\_\_\_\_  
 Name \_\_\_\_\_ Age \_\_\_\_\_  
 Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
 Employer (Spouse) \_\_\_\_\_ Occupation \_\_\_\_\_

Signature of Applicant \_\_\_\_\_  
 Signature of Spouse \_\_\_\_\_  
 Signature of Sponsors 1) \_\_\_\_\_ 2) \_\_\_\_\_

Dues: **Initiation Fee \$ 5.00, must be paid with application**

Family Membership \$75.00  
 Individual \$50.00

Total amount enclosed: \_\_\_\_\_ (Please make checks payable to IACC)

Interests  
 History \_\_\_\_\_ Dance \_\_\_\_\_ Drama \_\_\_\_\_ Genealogy \_\_\_\_\_ Music \_\_\_\_\_ Language \_\_\_\_\_ Retirees \_\_\_\_\_

Sports  
 Irish Football (adult) \_\_\_\_\_ (Children's) \_\_\_\_\_ Bowling \_\_\_\_\_ Darts \_\_\_\_\_ Golf \_\_\_\_\_ Pool \_\_\_\_\_

Functions:  
 Dances \_\_\_\_\_ Parade \_\_\_\_\_ Raffles \_\_\_\_\_ Scholarships \_\_\_\_\_ Banquet \_\_\_\_\_ Bazaar \_\_\_\_\_

Committees:  
 Festival \_\_\_\_\_ Parade \_\_\_\_\_ Building \_\_\_\_\_ Audit \_\_\_\_\_ Entertainment \_\_\_\_\_ Banquet \_\_\_\_\_ Drama \_\_\_\_\_

Irish County Affiliation \_\_\_\_\_ Spouse \_\_\_\_\_

Approved by Executive Board: Yes \_\_\_\_\_ No \_\_\_\_\_ Date \_\_\_\_\_ Membership# \_\_\_\_\_

Senior Citizens: **Must be a member for a full year** before qualifying for reduced senior rates of \$20.00 per person/\$30.00 per couple (aged 65+).

Were your Parents or Grandparents members? Yes \_\_\_\_\_ No \_\_\_\_\_  
 Names: \_\_\_\_\_

Mail completed application, initiation fee and membership dues to:

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 9 Venice Place  
 East Haven, CT 06512-1428