



Membership Affiliation Form

(Please use BLOCK CAPITALS throughout this form)

Name		Home Phone	
Address		Work Phone	
		Mobile Phone	
		Fax	
E-Mail			
Would you accept Flight Lines and other communications by email (this is a survey only and we will communicate with you again before this will be implemented)			YES / NO

Have you been a MACI member before		If yes, give reg. No. (if known)	IRL -	
Tick for type of membership	Senior	Spouse / Partner	Junior (under 18)	Family Junior (Junior sharing address with a parent member)
Club				Tick for non club

Membership of an affiliated club is a requirement for MACI insurance cover – see declaration below

I agree to be bound by the rules and by-laws of the MACI.

Signature		Date	
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Signature of club secretary/treasurer confirming membership of club	
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ALTERNATIVE DECLARATION IF AFFILIATING TO MACI AS A NON CLUB MEMBER (without a B-Cert and for the first time after 25 th November 1995)	
I wish to affiliate to the Model Aeronautics Council of Ireland <u>without any insurance cover.</u>	
I hereby renounce all claims to MACI insurance and I indemnify MACI, its officers, members and affiliated clubs against any claim which might arise as a result of any action of mine.	
Signature:	Date:

FEES: Senior: €65 Spouse/Partner: €30 Junior/Family Junior: €15

New Members and Lapsed members over 3 years	1 st Apr to 30 th Sept	€ 65
	1 st Oct to 31 st Dec	€ 30
	(from 1 st Oct to 31 st Dec: Spouse/Partner €15, Junior € 10)	
	**1 st Jan to 31 st Mar	€ 65

**The full fee for following year giving up to 15 months membership to the following March.
Membership without insurance cover: € 25 (senior), € 8 (junior)

Please send this form with remittance to:
Robert Norton, MACI Treasurer, 24 Bothairin Na Mullinn, Dungarvan, Co Waterford