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**MEMBERSHIP APPLICATION FORM**

|  |  |
| --- | --- |
| **Name:** |  |
| **Address:** |  |
| **Email:** |  |
| **Phone:** |  |
| **Mobile:** |  |

|  |  |
| --- | --- |
| **Signed:** |  |
| **Date:** |  |

**Please confirm your subscription and payment method below**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **MembershipSub.** | **Cost** | **Cash Payment** | **Cheque Payment** | **OnlineBank Transfer** | **Payment Date** |
| Individual | €20 |  |  |  |  |
| Family | €25 |  |  |  |  |
| 5 Year Individual | €90 |  |  |  |  |
| 5 Year Family  | €110 |  |  |  |  |

### *I hereby give my consent to HSHS collecting and using my personal information for communication and organisational purposes.*Please enter your full name when making payment by online bank transferHSHS Bank Details: IBAN: IE13 BOFI 9006 9014 2920 40 BIC: BOFIIE2DCheques should be made payable to Howth & Sutton Horticultural Society Post completed applications to HSHS Membership Officer, Suzanne O’Reilly, 78 St. Peter’s Terrace, Howth, D13 H008 or email info@hshs.ie