

IAS Membership Application

New Member _____ Renewal _____

Type Membership: Single- \$20.00 _____ Family - \$25.00 _____

Last Name: _____ First Name _____

Spouse: _____ Children (under 18) _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Year you joined the IAS _____

Irish topics of special interest to you/your family:

Any areas of Irish expertise?

Please complete this application and return it to:

P.O. Box 9614
Virginia Beach, VA. 23450

Or hand it in at the meeting.

We need this form completed to insure we have the current information on everyone in the society. Dues will not be accepted without this form. Dues cover membership from January – December of the year you join, regardless of the month you join, as per our by-laws. Everyone's annual dues are therefore due again each January.

Thank you for your cooperation.

IAS routing:

Financial Secretary _____

Mailing List _____

President _____

Membership _____ File