

## Declaration / Annual Subscription Form

Band:		Year:		
Branch:	Grade:	Date:		
Declaration We hereby declare and confirm that the above named band subscribes fully to, and will observe, support, promote, implement and abide by the Constitution, Rules and Child Protection Policy of the Irish Pipe Band Association and the aspirations and objectives set out therein.				

Secretary	Name (print)	
	Address	
	Phone	
	e mail	
	Signature	

P/M	Name (print)	
	Address	
	Phone	
	e mail	
	Signature	

DLP Child Protection	Name (print)	
	Address	
	Phone	
	e mail	
	Signature	

Fully completed form with Annual Subscription, duly signed must be returned to

Registrar:

Ann Sheehan 14 Glenard, Mona-Vally, Tralee, Co Kerry fitzbruch@gmail.com 087 /3938771