



IPBA Registration Form

Band:	Secretary:	Address:
Phone No.:	e-mail:	Page Number:

'We, the undersigned 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 there-in'.

MEMBER'S NAME print	ADDRESS print	P / D	Date of Birth (If under 18)	Phone No.	MEMBER'S SIGNATURE
				e-mail address	

Registrars Notes:

Date:

Branch Designation:

Page No.:

Registrar:

Note: This form, duly endorsed, must be carried by the Pipe Major on the day of a contest as proof of membership.