



MEMBERSHIP APPLICATION FORM

Name _____

Address _____

Email _____

Phone Number _____ (for administration only)

Membership Type: Adult €20 Junior €10 OAP €10 Student €10 Family €30

Payment : You can pay using Paypal to:- ipmsireland@gmail.com or send Postal/Money Order/Cheque, made out to "IPMS Ireland", to the Secretary at the address below.

(Please note that membership runs for the duration of a calendar year (January to December), irrespective of renewal date.)

Family Members **1** _____

2 _____

3 _____

Are you an IPMS(UK) Member? Yes / No **UK Membership No.** _____

Modelling Interests (Please tick all that apply)

- | | | |
|--|---|---|
| <input type="checkbox"/> Aircraft (military) | <input type="checkbox"/> Aircraft (civil) | <input type="checkbox"/> Military/AFVs |
| <input type="checkbox"/> Vehicles (cars/bikes/trucks) | <input type="checkbox"/> Helicopters | <input type="checkbox"/> Ships (military) |
| <input type="checkbox"/> Ships (civil) | <input type="checkbox"/> Dioramas | <input type="checkbox"/> Wargaming |
| <input type="checkbox"/> Sci-Fi / Real Space | <input type="checkbox"/> Fantasy | <input type="checkbox"/> Figures |
| <input type="checkbox"/> Motorsport | <input type="checkbox"/> Scratchbuilding | <input type="checkbox"/> Real Subject Photography |
| <input type="checkbox"/> Artwork (Profiles/Colours & Markings) | | <input type="checkbox"/> Reference |
| <input type="checkbox"/> Other e.g. _____ | | |

Any Comments _____

Signed _____ **Date** _____

Please return to : Philip Jones, 22 Roseville, Naas, Co. Kildare, Ireland

<i>[For official use only]</i>	Membership Number _____	Renewals	2018 <input type="checkbox"/>
			2019 <input type="checkbox"/>
			2020 <input type="checkbox"/>
Date of joining _____	Initial Renewal Date _____		2021 <input type="checkbox"/>