



Membership Application Form

(Complete in Block Caps where appropriate)

Post: Dublin Community Television, C/O Near FM,
Northside Civic Centre, Bunratty Road, Dublin 17.

email: dctvbulletinboard@gmail.com or info@dctv.ie

Name of Organisation/Individual Phone (h)
 Phone (w)
 E-Mail
 Address

Privacy: Personal information above is solely for the use of DCTV administration

Membership Category & Fee Payable:

Organisation	<input type="checkbox"/>	Individual	<input type="checkbox"/>	Unwaged	<input type="checkbox"/>
€75		€25		€15	

Method of Payment:

Cash	<input type="checkbox"/>	Cheque or Postal Order	<input type="checkbox"/>
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(All cheques should be made payable to: Dublin Community Television)

Membership Criteria:

- **Organisational members must be not-for-profit entities**
- **All members must support the aims of DCTV as set out in the DCTV Rules of Incorporation.**
- **All members must be familiar with, adhere to, the rules of DCTV as set out in the DCTV Rules of Incorporation.**

I confirm that I have read the preconditioned criteria above and understand that acceptance of membership of DCTV is deemed to be an acceptance of these conditions. I enclose the relevant subscription/fees as defined by DCTV and have completed as required the appropriate share application form.

Application must be proposed and seconded by DCTV Members:

Proposed by: 1.

Seconded by: 2.

Applicants Signature Date

For Official use only:

Total Membership Fee Received €.....

Date

Membership/Share No.....