



- MEMBERSHIP APPLICATION FORM -

Name: _____

Date of Birth: _____

Address: _____

Home Phone: _____

Mobile Phone (over 18 only): _____

IHFA YMA Club: _____

Signature of Applicant: _____

IF THE APPLICANT IS UNDER 18 YEARS OF AGE PLEASE ALSO COMPLETE THE FOLLOWING:

Name of Parent/Guardian: _____

Phone Number of Parent/Guardian: _____

Address of Parent/Guardian: (if different from above): _____

Signature of Parent/Guardian: _____

Not - By signing this form you agree to the following:

Your personal details are held on the YMA national register until you reach the age of 26 for the purpose of membership. This enables members to enter and participate in IHFA national and YMA international events. Your data will be protected and used only for the purpose collected. Consent will be sought at each event for the purpose of promotion: publishing results and photos in IHFA literature and website; national and regional press; and social media. As a member of the organisation you are bound by the IHFA/YMA Rules and Regulations.

- **IHFA YMA applicants must be aged 26 or under on the 1st of January of the current year**
- **IHFA YMA membership fee is a once off payment of €10**
- **IHFA YMA members who wish to register their own herd prefix must become full IHFA members**

**Please return to:
IHFA YMA,
Irish Holstein Friesian Association,
Clonakilty, Co. Cork.**