



Down
Syndrome
Ireland
Kildare Branch

2021 Membership / Renewal Form

Parent / Guardian Name _____

Address _____

Telephone Home _____

Mobile _____

Mobile _____

E-mail Address _____

E-mail Address _____

Name of Person with Down Syndrome _____

Date of Birth _____ Gender: Male Female

Payment Details

Please return this form, to update our records, by email or post to the above address. *Subscription for the year is €20 _____

Cheques made payable to Down Syndrome Ireland Kildare Branch or
Online transfer to Allied Irish Bank, Down Syndrome Ireland Kildare Branch
A/C No. 16113027 Sort Code 93-32-44 BIC: AIBKIE2D

IBAN: IBAN IE69 AIBK 93324416113027

(Please remember to put your name on line transfers)

- Do you agree to receive all correspondence by email or text? Yes__ No__
- Do you give consent for your Child/Teen/Adult to be photographed while taking part in any group/individual activities within the branch?
Yes__ No__ Ask first__
- Do you give permission for Members photo to be shared on Branch Facebook page? Yes __ No__ Ask First__



Postal address:
Kildare Down Syndrome Ireland
c/o Secretary, "Beechaven"
Lullymore West, Rathangan
Co. Kildare

secretary@kildaredownsyndrome.ie
Office Number 045-487584

Office based:
Pipershill Education Campus
Naas
Co Kildare