



Alias / Bar Code

# Membership Form 2024 - 2025

Family Name ..... Given Name .....

Address .....

Postcode ..... Town .....

Phone ..... Mobile ..... email .....

Regular / Family  Senior \*  Student

\*Card Pass Senior number .....

### Activities of Interest:

Conversation Class: No  Day ..... Class Time .....

Activities  Book Club  Library  Story Time\*

\*For Story Time please provide your child's Name ..... Age .....

**CCB Membership Fee** (Required) Senior - 40€ Family - 30€ Student - 20€

**Conversation Class** No. of weeks ..... at 12.00€ per hour: € .....

**Story Time** No. of weeks ..... at 8.00€ per hour: € .....

**Total Amount Due** € ..... **Total Paid** € ..... Cash / Cheque / Vir (circle)

**Comment** .....

**Member's Signature** ..... **Date** .....