

Maynooth Hillwalking Club

Visitors Application Form

Name			
Address			
Phone No:		email address:	
Mobile No:			

Next of Kin Details:

Name:			
Address:			
Phone No:		Mobile No:	

Conditions of Temporary Membership

I acknowledge receipt of a copy of the rules for visitors attending club activities and agreed to be bound by them. I accept that hillwalking is an activity with a danger of personal injury or death. I am aware of and shall accept these risks and wish to participate in these activities voluntarily and shall be responsible for my own actions and involvement.

Signed:

Date:

Name

Note: ALL Visitors attending activities do so at their own risk and the Maynooth Hillwalking Club, guides and officials cannot accept responsibility for any loss or injury