

National Parents' & Siblings' Alliance

Membership Application Form 2011

Group Name: _____

Chairperson's Name: _____

Address: _____

Phones: _____

e-mail address: _____

Secretary's Name: _____

Address: _____

Phones: _____

e-mail: _____

Number of members in your group: _____

Please return the completed application form with the annual subscription of €150 per group to:
Seamus Greene, 31, Magenta Hall, Santry, Dublin, 9.

Contact: Seamus Greene. npsa@eircom.net, 01-8624100, 087-8570745