



Fitzpatrick's Sporting Club
Tait's Corner, Glentworth St. Limerick. Ireland

Surname: _____ First: _____

Address: _____

TEL: (H) _____

MOBILE: _____

D.O.B.: _____ NATIONALITY: _____

OCCUPATION: _____ E: MAIL: _____

PREFERRED GAMES:
(Please tick)

American Roulette	<input type="checkbox"/>	Texas Hold'em	<input type="checkbox"/>
Blackjack	<input type="checkbox"/>	Omaha	<input type="checkbox"/>
3 Card Brag	<input type="checkbox"/>	Draw	<input type="checkbox"/>
Caribbean Stud	<input type="checkbox"/>		<input type="checkbox"/>

Are you a Poker Player

Yes No Do you Play Poker Online: Y N

Passport No. _____

Drivers Licence. _____

I agree the information supplied in this application for membership is true and correct.
I also agree to be bound by the rules & conditions as laid down by The Fitzpatrick's Sporting Club
and I may receive information relating to products and services that the club may feel would be of
interest to me.

SIGNED: _____ DATE: _____

I do not wish to be contacted or receive information from The Fitzpatrick's Club