



Gaelic American Club, Inc.

74 Beach Road, Fairfield, CT 06824

Membership Heritage Affirmation

Membership@gacemail.org

For GAC Office Use Only

Date received: _____

Application Fee: \$ _____

Check Number: _____

PLEASE Fill and PRINT this form [Nothing will be saved when closed]

SIGN it, obtain your two SPONSOR SIGNATURES and return to the club.

This is Part 2 of the application process. Part 1 is the Online Application at www.gaelicamericanclub.com

I, _____ [Full name]

Address: _____

City: _____ Zip: _____

Email Address: _____

Phone: () _____ - _____

having applied online for membership of the Gaelic American Club, hereby affirm that I am of Irish descent. I describe my heritage in the space below or on the back of this form and/or attach further details in separate attached document(s). I further affirm that, if I am applying for "Newly Arrived from Ireland" status, that I have arrived to reside in the USA within the past 12 months. If I am applying for "Family 1" membership, and have a spouse, I will sign her/him in as a visitor every time she/he visits the club. Upon acceptance, I agree to abide by the Constitution and By-Laws of the Gaelic-American Club. I further certify that if I knowingly provide false information on this membership application, my membership will be revoked, and that my actions can jeopardize the membership status of my sponsors.

You must include a short explanation of your Irish heritage or include a family tree:

Applicant's signature

Date

SPONSORS: TWO REQUIRED / cannot be husband & wife

I certify that I have conducted reasonable due diligence to verify the Irish birth or descent of this applicant(s) and if I knowingly or negligently sponsor a person of non-Irish birth or descent, then my membership can be revoked or be subject to other penalties imposed by the GAC Executive Committee.

PLEASE PRINT: Make sure Sponsor information is legible. If we cannot read names, it will slow the process.

Sponsor 1: _____ Address: _____

Member Signature: _____ Date _____ Phone: () _____ - _____

Sponsor 2: _____ Address: _____

Member Signature: _____ Date _____ Phone: () _____ - _____

Rev 12/29/20

Please include the \$30 Application Fee when sending this form to the club if not paid with application.