



IRISH TRANSLATORS' & INTERPRETERS' ASSOCIATION
CUMANN AISTRITHEOIRÍ AGUS TEANGAIRÍ NA HÉIREANN

Application Form for **Student** Membership

Please use block letters

Title (Mr/Mrs/Ms/other.): _____

Surname: _____

First name(s): _____

Address: _____

Telephone: _____

Email: _____

Fax: _____

Website: _____

Country of birth: _____

Nationality: _____

Third Level Institute: _____

Title of course: _____

Where did you hear about the ITIA? _____

What are your main reasons for wishing to join the ITIA?

I subscribe to the aims of the ITIA and agree to abide by the Code of Practice and Professional Ethics of the Association. I hereby apply for Student Membership of the ITIA

Signature: _____

Date: _____

All applications must be accompanied by:

- 1) Full CV
- 2) Annual subscription (€ 15 up to 31 May 2010)
- 3) Signed Declaration to the Code of Conduct of the ITIA (available on website)

Please indicate method of payment:

Cheque / PO ____ Credit/Debit Card ____

Bank Transfer ____ Standing Order ____

Please send completed applications to:

The Membership Secretary
Irish Writers' Centre
19, Parnell Square
Dublin 1
Ireland