DELMARVA IRISH AMERICAN CLUB

Membership Application/Renewal

Name(s): (1)_____ (2)_____

Mailing Address: _____

_____

Cell Phone(s): (1)_____ (2)_____ Home Phone: _____

Email Addresses: (1)_____ (2)_____

Please print clearly. Dues are $12 per year, per person. TOTAL AMOUNT ENCLOSED: $_____

Make checks payable to Delmarva Irish American Club and mail to DIAC, P.O. Box 4033, Ocean City, MD 21843, or use this QR code.