



**New Membership Form 2010**  
**Coeliac Society of Ireland**

Carmichael Centre, 4 North Brunswick Street, Dublin 7  
 www.coeliac.ie

Phone: (01) 872 1471 - Fax (01) 873 5737 - Email: info@coeliac.ie

Branch	MNo	50c Fee applies to all credit/laser transactions <input type="checkbox"/>
Previous Renewal	SF <input type="checkbox"/> OC <input type="checkbox"/>	
Name		Parent/Guardian
Address		
Email (for Coeliac News Online)		
Tel/Mob	Date of Birth	Year of Diagnosis
<b>Symptoms (please tick those that applied at diagnosis):</b> Anaemia <input type="checkbox"/> Fatigue <input type="checkbox"/> Diarrhoea <input type="checkbox"/> Stomach Pain <input type="checkbox"/> Constipation <input type="checkbox"/> Weight Loss <input type="checkbox"/> Failure to Thrive <input type="checkbox"/> Mouth Ulcers <input type="checkbox"/> Bloating <input type="checkbox"/> Indigestion <input type="checkbox"/> Moodiness <input type="checkbox"/> Bone Pain <input type="checkbox"/> Depression <input type="checkbox"/> Rash <input type="checkbox"/> Flatulence <input type="checkbox"/> Vomiting <input type="checkbox"/> IBS <input type="checkbox"/>		

Membership details are kept confidential at all times. The supply of medical information is optional and requested for the purpose of improving support and services to Coeliacs.

**Condition** Coeliac  Dermatitis Herpetiformis  Interested Party   
**Method of Diagnosis** Biopsy  Blood Test  Symptom Only   
**Other Conditions** Diabetes  Osteoporsis  Thyroid Disease  Other   
**Told of CSI by:** Dietitian  Doctor  Media  Literature  Internet  Member  Pharmacy

New members receive an Information Pack which includes the current *List of Foods Suitable for Coeliacs* booklet. The *Food List* is produced annually so membership must be renewed every January/February.

New Membership 2010 €25

Family Membership (2 copies of Food List to 1 household) 2010 €30

**Eating Out Language Cards: (please tick and write no of each card required) €2 Each**

Bulgarian  \_\_\_ Croatian  \_\_\_ Chinese  \_\_\_ Czech  \_\_\_ Dutch  \_\_\_  
 English  \_\_\_ French  \_\_\_ German  \_\_\_ Greek  \_\_\_ Hungarian  \_\_\_  
 Italian  \_\_\_ Spanish  \_\_\_ Polish  \_\_\_ Portuguese  \_\_\_ Turkish  \_\_\_

Gluten Free All-Sorts (Cook Book) €10

Donation (optional) €5  €10  €15  €20  other \_\_\_\_\_

Christmas Cards €5 per pack of 10  special offer 4 packs for €18 incl p&p

Cheque  PO  Bank Draft  Credit Card  **Total Amount** \_\_\_\_\_

Please send me a Direct Debit form for annual renewal of membership in future

Please fill in second page only if you wish to pay your membership fee by credit or laser card. Otherwise please attach a cheque or postal order to the completed form and return it to the address above, marked 'membership'. Most applications are processed within two to three working days. At certain times we experience an influx of renewals which may delay this process however we endeavour to deal with your form as quickly as possible. Please do not send cash in the post.

**Office Use Only**

Post Date	Lodgment No	Sent By
Items Sent: Pack <input type="checkbox"/> EO <input type="checkbox"/> CB <input type="checkbox"/> CN <input type="checkbox"/> TY <input type="checkbox"/> GMS <input type="checkbox"/> REC <input type="checkbox"/> INV <input type="checkbox"/> CHL <input type="checkbox"/> DD <input type="checkbox"/> FL2 <input type="checkbox"/>		



**New Membership Form 2010  
Credit Card Transactions**

Carmichael Centre, 4 North Brunswick Street, Dublin 7  
www.coeliac.ie  
Phone: (01) 872 1471 - Fax (01) 873 5737 – Email: info@coeliac.ie

Please **do not email** or fax cc/laser details to this office for security reasons; call or post only.

<b>Office Use</b>	Please note that a €0.50 surcharge applies to all credit card transactions
Name on card	
Billing Address (if different from delivery address)	
Member's name	
Contact Tel	

**Visa**      
 **MasterCard**      
 **Laser**      
 **Other**

 
   
   

**Expiry Date**

**CVV2 No\***

*\*The CVV2 is located on the back of the credit card above your signature – enter the last three digits only.*

The Coeliac Society receives **little government funding** and is reliant on membership fees to remain in existence. If you wish to make a donation no matter how small, it will assist the Coeliac Society in its aim to promote and protect the interests of its members in relation to the coeliac condition.

**Note:** Direct Debit forms for 2010 are available from [info@coeliac.ie](mailto:info@coeliac.ie) or 01 8721471.

**Total Debited** \_\_\_\_\_ **Date** \_\_\_\_\_ **Staff** \_\_\_\_\_  
**Goods/Receipt Sent** Yes  No  **Date** \_\_\_\_\_ **Staff** \_\_\_\_\_  
**Items Sent:** Pack  EO  CB  CI  TY  GMS  Rec  Inv  ChL  DD  FL2   
 XC   
**Trans No** \_\_\_\_\_