

Membership 2020/2021



Please check the information below and amend where necessary.

Note:

- All school information provided below is recorded and updated annually on renewal of your membership subscription. It is used for statistical information and planning for future CPD events.
- Personal & contact information will not be shared with any third party and you can opt out of receiving our weekly e-sceal, sms/push notifications and mailing lists subscription

School Contact Information

Roll No. _____ Tel. No. _____
 School Name: _____
 School Address: _____
 Eircode _____

School Profile

SCHOOL DETAILS

SCHOOL TYPE	Mainstream <input type="checkbox"/>	Vertical <input type="checkbox"/>							
	Mainstream with Special Classes <input type="checkbox"/>	Junior School <input type="checkbox"/>							
	Special School <input type="checkbox"/>	Senior School <input type="checkbox"/>							
GENDER	Girls <input type="checkbox"/>	Boys <input type="checkbox"/>	Co-ed <input type="checkbox"/>	Girls with Infant Boys <input type="checkbox"/>					
SCHOOL PATRONAGE	An Foras <input type="checkbox"/>	Autism Ireland <input type="checkbox"/>	Catholic <input type="checkbox"/>	Church of Ireland <input type="checkbox"/>	Educate Together <input type="checkbox"/>				
	Pátrúnachta <input type="checkbox"/>	Jewish <input type="checkbox"/>	Methodist <input type="checkbox"/>	Multi-Denominational <input type="checkbox"/>	Muslim <input type="checkbox"/>	Presbyterian <input type="checkbox"/>	Private <input type="checkbox"/>	ETB <input type="checkbox"/>	Other: <input type="checkbox"/>
CLASSIFICATION	DEIS 1 <input type="checkbox"/>	DEIS 2 <input type="checkbox"/>	DEIS Rural <input type="checkbox"/>	Detention Centre <input type="checkbox"/>	Gaelscoil <input type="checkbox"/>	Hospital School <input type="checkbox"/>	Island School <input type="checkbox"/>	Scoil sa Ghaeltacht <input type="checkbox"/>	
ENROLMENT	Sept 2018 _____								
STAFFING LEVELS	Mainstream Class Teachers <input type="checkbox"/> Shared Teachers based in this school <input type="checkbox"/> Support Teachers (LST/SEN/ESL, etc.) <input type="checkbox"/> SNAs & Classroom Assistants <input type="checkbox"/> Full-time Secretary <input type="checkbox"/> Full-time Caretaker <input type="checkbox"/> Part-time Secretary <input type="checkbox"/> Shared Teachers based in this school <input type="checkbox"/>								

Contact Information

Please ensure that the details for both Principal & Deputy are correct
 This information is used to keep you updated on important information/events etc.

PRINCIPAL

Name	Role
Age	Status
21-30 yrs <input type="checkbox"/>	21-30 yrs <input type="checkbox"/>
31-40 yrs <input type="checkbox"/>	31-40 yrs <input type="checkbox"/>
41-50 yrs <input type="checkbox"/>	41-50 yrs <input type="checkbox"/>
51-60 yrs <input type="checkbox"/>	51-60 yrs <input type="checkbox"/>
61 + yrs <input type="checkbox"/>	61 + yrs <input type="checkbox"/>
Mobile	
Email	(direct IPPN correspondence only)
SMS/Push Notifications	I wish to receive sms/push notifications from IPPN <input type="checkbox"/>
Mailing Lists	I wish to be subscribed to/continue my subscription of IPPN Mailing lists <input type="checkbox"/>
(preferred email for mailing lists)	

Please ensure the Deputy Principal contact information is complete so they can also benefit from IPPN Supports & Services

DEPUTY PRINCIPAL

Name	Role
Age	Status
21-30 yrs <input type="checkbox"/>	21-30 yrs <input type="checkbox"/>
31-40 yrs <input type="checkbox"/>	31-40 yrs <input type="checkbox"/>
41-50 yrs <input type="checkbox"/>	41-50 yrs <input type="checkbox"/>
51-60 yrs <input type="checkbox"/>	51-60 yrs <input type="checkbox"/>
61 + yrs <input type="checkbox"/>	61 + yrs <input type="checkbox"/>
Mobile	
Email	(direct IPPN correspondence only)
SMS/Push Notifications	I wish to receive sms/push notifications from IPPN <input type="checkbox"/>
Mailing Lists	I wish to be subscribed to/continue my subscription of IPPN Mailing lists <input type="checkbox"/>
(preferred email for mailing lists)	

SEPA Direct Debit Mandate

Unique Mandate Reference (UMR)	
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Unique Mandate Reference (UMR) to be completed by Irish Primary Principals' Network

Creditor Identifier:	IE 44 SDD 305954	Type of Payment	Recurrent Payment <input type="checkbox"/>	One off Payment <input type="checkbox"/>
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Creditor's Name:	Irish Primary Principals' Network
Creditor's Address: Glounthaune, Co Cork, Ireland	

By signing this mandate form, you authorize (A) Irish Primary Principals' Network to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instructions from Irish Primary Principals' Network. As part of your rights, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank. A refund must be claimed within 8 weeks starting from the date on which your account was debited.

Please complete all fields marked with *

*Debtor Name	
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Debtor Address	
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City	
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*Debtor Account Number – IBAN	
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*Debtor Bank Identifier Code – BIC	
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*Note: If this is a joint account – both signatures are required

*Signature:	*Date of Signature
	_ / _ / _

*Signature:	*Date of Signature
	_ / _ / _

Note: Your rights regarding the above mandate are explained in a statement that you can obtain from your bank.
Please return this mandate to: IPPN Support Office, Glounthaune, Co Cork

Information Purposes Only

Debtor Roll No.	Description of Contract	IPPN Membership Fee	Amount	€
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MEMBERSHIP TERMS & CONDITIONS

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| <ol style="list-style-type: none"> 1. Your personal & contact details will not be shared with a third party 2. DES Circular 14/2002 states that the IPPN Professional Membership fee is an appropriate BoM expense 3. Membership Fee is for the academic year 2020/2021: <ol style="list-style-type: none"> a) Teaching Principal & Deputy = €250 b) Administrative Principal & Deputy = €290 4. Deputy Principal's membership of IPPN does not incur any additional fee. 5. Deputy Principal has access to networking@ipn.ie and www.ipn.ie (please provide email address) 6. Please view the Mailing Lists Terms & Conditions, they can be found on www.ipn.ie | <ol style="list-style-type: none"> 7. In 2 teacher schools, the 2nd teacher can be registered as the Deputy Principal for the purpose of IPPN membership 8. Cheques should be crossed and made payable to IPPN. Please write the School Roll No. on the back of cheque 9. If you choose to renew your membership using Direct Debit - please complete the mandate above 10. A receipt will be issued for your Board of Management to the Principal's email address given overleaf. Membership Form and Fee should be posted to: Membership, IPPN Support Office, Glounthaune, Co Cork 11. Please note any information provided will not be shared with a third party |
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Obtaining Personal Information – Data Protection

In order to deliver our services IPPN needs to process the following categories of personal data. It is important to obtain, use and store information about you, in order for us to deliver you the best possible service. This personal data includes: **Personal details such as your name, age, address, telephone numbers, email address and bank details.** Your personal data is stored on computer and on manual record. We will regularly update your personal data to keep it relevant. We ask that you please inform us of any significant changes, such as a change of address or other contact details, at your earliest convenience.; Lawful basis relied upon: Contract - because you are joining IPPN as a member or you are renewing your membership.