


# Membership Form 2024/2025

Please check the information below and amend where necessary

If you wish to subscribe to networking or receive our direct SMS, please ensure you  the necessary boxes

Fee :  **Teaching Principal & Deputy €250.00**

**Administrative Principal & Deputy €290.00**

## School Information :

Roll No.	<input type="text"/>	Tel. No.	<input type="text"/>
School Name	<input type="text"/>		
School Address Please include Eircode	<input type="text"/>		
School Type	<input type="text"/>	School Structure	<input type="text"/>
Patronage	<input type="text"/>	Gender	<input type="text"/>
Enrolment for 2024	<input type="text"/>	Classification	<input type="text"/>

## Staffing Levels : *State the number of persons not hours'*


Mainstream Class Teachers	<input type="text"/>	Shared Teachers based in school (SET Cluster/ Supply Panel)	<input type="text"/>	Secretary	Full - time <input type="text"/>	Part-time <input type="text"/>
Support Teachers (SET / EAL / HSCL, etc.)	<input type="text"/>	SNA's & Classroom Assistants	<input type="text"/>	Caretaker	Full - time <input type="text"/>	Part-time <input type="text"/>

## Principal Contact Information : If you have a change in principalship, amend where possible or include a note with form

NAME	<input type="text"/>	Age	<input type="text"/>	if you need to update	21-30 yrs <input type="checkbox"/>	31-40 yrs <input type="checkbox"/>	41-50 yrs <input type="checkbox"/>	51-60 yrs <input type="checkbox"/>	60+ yrs <input type="checkbox"/>
Role Type	<input type="text"/>	Mobile	direct IPPN correspondence only						
Status	<input type="text"/>	SMS Communication	I am happy to receive updates from IPPN via SMS/push notifications <input type="checkbox"/>						
New Appointment if applicable	Name of new Principal <input type="text"/>	Date of Appointment if applicable	<input type="text"/>						
Email	direct IPPN correspondence only (E-scéal etc) <input type="text"/>								
Networking List	Preferred email for networking@ippn.ie <input type="text"/>	I wish to be subscribed to/continue my subscription of IPPN networking <input type="checkbox"/>							
Support Group	Are you currently a member of a support group?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	if not, would you like to be?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			
	Specify Location	<input type="text"/>							

## Deputy Principal Contact Information : If you have a change in deputy principalship, amend where possible or include a note with form

NAME	<input type="text"/>	Age	<input type="text"/>	if you need to update	21-30 yrs <input type="checkbox"/>	31-40 yrs <input type="checkbox"/>	41-50 yrs <input type="checkbox"/>	51-60 yrs <input type="checkbox"/>	60+ yrs <input type="checkbox"/>
Role Type	<input type="text"/>	Mobile	direct IPPN correspondence only						
Status	<input type="text"/>	SMS Communication	I am happy to receive updates from IPPN via SMS/push notifications <input type="checkbox"/>						
New Appointment if applicable	Name of new Deputy Principal <input type="text"/>	Date of Appointment if applicable	<input type="text"/>						
Email	direct IPPN correspondence only (E-scéal etc) <input type="text"/>								
Networking List	Preferred email for networking@ippn.ie <input type="text"/>	I wish to be subscribed to/continue my subscription of IPPN networking <input type="checkbox"/>							
Support Group	Are you currently a member of a support group?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	if not, would you like to be?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			
	Specify Location	<input type="text"/>							

If you wish to subscribe to networking or receive our direct SMS, please ensure you  the necessary boxes

## SEPA Direct Debit Mandate

Unique Mandate Reference (UMR)

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

Creditor Identifier:

IE 44 SDD 305954

Type of Payment

Recurrent Payment  One-off Payment

Creditor's Name

Irish Primary Principals' Network

Creditor's Name

Richmond, Glanmire, Cork T45 P406

By signing this mandate form, you authorise (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 the fields marked with \*

\*Debtor Name

Debtor Address

\*Debtor IBAN

\*Debtor BIC

\*Signature

Date

Note: if this is a joint account - both signatures are required

\*Signature

Date

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

Office Information Purposes Only

Debtor Roll No.

Membership Fee Amount

### MEMBERSHIP TERMS & CONDITIONS

1. Your personal & contact details will not be shared with a third party
2. Per DE Circular 14/2002, the IPPN professional membership fee is an appropriate BoM expense
3. Both Principal and Deputy Principal are included in the membership fee: **a) Teaching Principal & Deputy = €250**  
**b) Administrative Principal & Deputy = €290**
4. Principals and Deputy Principals have access to [networking@ippn.ie](mailto:networking@ippn.ie) and [www.ippn.ie](http://www.ippn.ie) (please provide email address)
5. Please view the Mailing Lists Terms & Conditions, which can be found on [www.ippn.ie](http://www.ippn.ie)
6. In a two-teacher schools, the second teacher can be registered as the Deputy Principal for the purpose of IPPN membership
7. Cheques should be crossed and made payable to IPPN. Please write the School Roll No. on the back of the cheque
8. If you choose to renew your membership using Direct Debit, please complete the mandate above
9. 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: **'24/25 Membership', IPPN Support Office, Richmond, Glanmire, Cork, T45 P406.**
10. Information provided on the form is used for statistical information and planning for future CPD events.
11. You can opt out of receiving our weekly E-scéal, SMS/push notifications and mailing lists subscriptions.

#### Obtaining Personal Information – Data Protection

In order to deliver the best possible service to you, IPPN needs to obtain, use and store information about you, including: 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.