

APPLICATION FORM - HALF SEASON TICKET

NAME:

ADDRESS:

POSTCODE:

EMAIL:

D.O.B:

MOBILE:

MEMBERSHIP TYPE (MARK WITH AN 'X')

ADULT

£100

CONCESSION

£70

JUNIOR

£10

PAYMENT TYPE (MARK WITH AN 'X')

CARD

CHEQUE

DONATION

ABOVE YOUR MEMBERSHIP PAYMENT, SHOULD YOU WISH TO PROVIDE A ADDITIONAL DONATION PLEASE STATE THE AMOUNT IN THE ABOVE BOX. PAYING BY CARD - PLEASE FILL DETAILS BELOW.
CHEQUE - PLEASE POST WITH FORM. 3 MONTH PAYMENT PLAN - ONLINE OR PLEASE CONTACT THE CLUB.

CARD NO.

VALID FROM

VALID TO

CSC. NO

DELIVERY METHOD (£1 FOR POSTAGE)

COLLECT

POST

WANT TO APPLY VIA EMAIL?

YOU CAN ALSO DOWNLOAD THE ABOVE
APPLICATION FORM AT
SHEFFIELDEAGLES.COM AND EMAIL THE
COMPLETED TO
INFO@SHEFFIELDEAGLES.COM

