

## **MEMBERSHIP FORM**

Title		Name			Surname					
New Membe	Iew Membership Renewal					Membership No (if known)				
Address										
					Pos	st Code				
Home No Mobile No					Date of birth					
Email address										
I wish to bed	come a	memb	er of the Sh	ots' Tru	st					
Signed					Date					
MEMBERS	HIP T	YPE								
Junior (U18)		1 year	£5		Family (2 Adults, 2+		1 year	£25		
, ,					Juniors					
Adult (18-64 yrs)		1 year	£10		5 years'		£40			
Senior (65yrs +)		1 year	£6		5 yrs		£24			
Lifetime £200							•			
Standing Ord STANDING Start Date (n	ORD	ER MA	NDATE –	THIS IS	S A NEW INSTR	<u>UCTIO1</u>	N			
Bank Name										
Branch Add	ress									
,					Post code					
					1					
ACCOUNT	TO B	E DEBI	TED							
Sort				Account No						
Code										
Account Nat	me					•				
BENEFICIA	ARY D	ETAIL	S							
Aldershot To	own S	upporte	rs Trust, Ba	arclays E	Bank					
					Account No	7397	77250			
									·	
<b>PAYMENT</b>	DET A	AILS								
Amount of First Annual Payment					£					
Amount of Usual Annual Payment					£					
Amount of Usual Payment (in words)										
Date of mon										
Please contin	nue pa	yments	until furthe	er notice						

Please return this form to the Ticket Office (for the attention of Janet Guess), or post to Janet Guess, the Shots' Trust, c/o Aldershot Town FC, the EBB Stadium, High Street, Aldershot, GU11 1TW

Date

Account Holder's Signature