



Weston Hockey Club

I wish to join Weston Hockey Club:

Membership 2009/10

Name:.....

Address:.....

.....

Phone:.....**Mobile/Work:**.....

E-mail Address:.....

Standing Order Mandate

Your Bank Details:

To: The Manager

.....

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.....

I/we authorise and request that you debit my/our account for four (4) months the sum of **€43.50 / €76.00** per month.

Account Name:.....

Account Number: _ _ _ _ _

And Credit: Weston Hockey Club No. 1 Account

Bank: AIB,
Main Street,
Leixlip,
Co. Kildare.

National Sort Code: 93-36-35
Account Number: 22450048

Payer Reference: _____

Frequency: Every Month

Start Date: _ / _ / 08

Signed:..... **Date:** _ / _ / 08

*****Please return completed form to Weston Hockey Club for processing**