

Please complete sections A, B, D and E of the form, plus Section C if you wish

If you are doing this on paper, please send your completed form and cheque to Barnsley FC Supporters Trust, Oakwell Stadium, Grove St, Barnsley S71 1ET, United Kingdom.

All Trust members MUST complete one membership form each.

A: YOUR DETAILS						
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Surname:			First I	Name:		
Postal Address:						
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Post Code:	Contact Number: (Mobile)			Email is the preferred form of contact from the Trust.		
	(Mobile)					However if you would prefer to be contacted by post
Email Address:						please tick here.
Date of Birth:						
This Trust is run on a voluntary basis, if you can lend any help to its success please state in the box any skills or time that you may be able						
to offer						
B: MEMBERSHIP T	YPE					
Please tick the appropriate box to confirm your membership type.						
NOTE: Only those aged 16 and above have voting rights with their membership.						
Adult single - £10/y		Over 60's single - £5/yr				
Junior (under 16) single CE/ur				Family Membership - £25/yr		
Junior (under 16) single - £5/yr Family Membership - £25/yr						
Life Membership single - £100						
C: DONATION						
I wish to donate to BFCST the sum of \pounds in addition to my annual membership fee.						
D: PAYMENT DETA	TIS					
You can pay by cash, cl		edit/debit card or PavPa	al (£10.54	inc the PavPal cha	arge). So pleas	se fill in one of the two
boxes below. If you pay						
Cash Enclosed:	£	Paypal:	£	Paypal reference	e no:	
Chague anglacada	£	Cradit/Dabit cards	£	Cradit/Dabit car	rd no	
Cheque enclosed:	<u>t</u>	Credit/Debit card:	£	Credit/Debit car	u 110.	
		Expiry Date	·			
		CVS Number				
				Cardholder Nam	ne	
E: DECLARATION						
I wish to become a member of the Barnsley FC Supporters Trust in accordance with its rules.						
		a, 1 0 0apport				
Signed:				ate:		
E. OFFICE LIGHT CALL	LV					
F: OFFICE USE ON Date Application Received		mbership Number		Share Certificate	Issued	
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