Chesterfield Football Supporters Society

Putting the Trust back into Supporting Chesterfield FC

CHESTERFIELD FOOTBALL SUPPORTERS SOCIETY

MEMBERSHIP / MEMBERSHIP RENEWAL APPLICATION FORM

Office use:

Surname:		**Forenames:**		M/F*
Address:	**Postcode:**			
Tel No:		**Email address:**		
Are you an existing Member	Yes /No	**Membership number:**		
Date of birth: (if applying for concessionary membership)				
Type of Membership		Please tick		
I enclose cash* Cheque payable to CFSS* Standing order Mandate* Credit Card Authorisation* (delete as applicable) and I agree to be bound by t he rules of the Chesterfield Football Supporters Society Signed Date		**Annual - Full Age** £10 **Annual – Concessionary** £5 **Three Year- Full** £25 **Three Year Concessionary** £12.50 **Life Membership** £100 **Donation-** Thank you £_____ **Total enclosed** £		
Standing Order Mandate				
Name of your Bank *Bank address* *Account name* *Sort code* *Account number* *Please pay the sum of £10 per year commencing 30th June 2005 until further notice* *Signed Date*		*Please Pay* *The Co-operative Bank* *Kings Valley* *Yew Street* *Stockport* *Cheshire* *SK4 2JU* *Sort Code 08-92-99* *Account No 65066649*		

CREDIT CARD AUTHORISATION

Please debit my ☐ Visa ☐ Mastercard

Card Number

Expiry Date: ……/……

Signature: ……..Date:……..

Please forward to:- Membership Secretary CFSS, Recreation Ground, Saltergate, Chesterfield S40 3SX, please ensure you use a postage stamp.

Membership information is maintained by CFSS in accordance with the provisions of the Data Protection Act.

If you have any objection to officers of the club contacting you on matters of benefit to the club then please tick this box ☐