

MEMBERSHIP FORM

Please complete in BLOCK CAPITALS



INDEPENDENT
SUPPORTERS TRUST

PERSONAL DETAILS

TITLE	MR / MRS / MS / MISS / OTHER _____		
FORENAME		SURNAME	
ADDRESS			
	POSTCODE		
TEL: (daytime)		TEL: (eve/mobile)	
E-MAIL		DATE OF BIRTH	
OCCUPATION			

SUBSCRIPTION INFORMATION

PLEASE TICK	MEMBERSHIP DETAILS	COST
<input type="checkbox"/>	ANNUAL ADULT MEMBERSHIP	£10.00
<input type="checkbox"/>	ANNUAL JUNIOR MEMBERSHIP (applicant must be under 16 years of age as at 1st July 2004)	£5.00
<input type="checkbox"/>	SIX MONTH MEMBERSHIP	£5.00
<input type="checkbox"/>	DONATION – Additional to membership (Note: this is entirely voluntary but extremely welcome!!)	£
	TOTAL	£

PAYMENT DETAILS

PLEASE TICK	PAYMENT TYPE
<input type="checkbox"/>	STANDING ORDER – (this is our preferred option as it will reduce both our administration costs & time)
<input type="checkbox"/>	CHEQUE – Made payable to IPSWICH TOWN INDEPENDENT SUPPORTERS TRUST
<input type="checkbox"/>	CASH – Please do not send cash through the post

PAYMENT DETAILS

RETURN TO: IPSWICH TOWN IST PO BOX 44439 LONDON SE1 2TW	SIGNATURE
	DATE

Your information will be held on the Ipswich Town 1st database and will be used only for the administration of the Trust. We will not pass your details to any third party.

OFFICE USE ONLY – MEMBERSHIP NUMBER