



Credit Card Payment Details Form

Member Name:

Membership No:

Post Code:

Type of Membership Required	Tick as appropriate
Full £32	
Associate £17	
Junior (U25) £17	
EU £32	
Overseas £12	

Card Details:

Type of Card: (Tick)

Visa	Visa Debit	MasterCard	Solo	Other(name)

Card Number:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Card Start Date:

--	--	--	--

Card Expiry:

--	--	--	--

Card Security Number (last 3 on reverse strip)

--	--	--

Name as printed on card:

Amount to be debited (£):