BOHEMIAN F.C. MEMBERSHIP STANDING ORDER MANDATE

To: The Manager		
		[Name & address
		of <u>Your</u> Bank]
I/we authorise and request that you del	bit my/our account t	he sum of € per month
Your Account Name:		
IBAN:		
BIC:	_	
And Credit: Bohemian Football Club. Bank: AIB, 140 Lr Drumcondra Road, Drumcondra, Dublin 9.	BIC: AIBK IBAN: IE9 Payer Refere	3 AIBK 932205 01266417
Frequency: MONTHLY		[<u>Your</u> Name in CAPITALS
*Start Date: <i></i> //		
Signed:	Da	ate: <i>II</i>
Your E-Mail Address:		

Please provide an e-mail address if you wish to receive all official club communications by e-mail. You will receive an initial e-mail from **membership@bohemians.ie** Thank you!

Please forward this mandate to your bank for processing. *Allow one week when filling in Start Date.

Please send a copy to: Lynn O'Neill, Administration Manager, Bohemian FC, Dalymount Park, Phibsborough, Dublin 7, D07 YXW0 or e-mail copy to lynn@bohemians.ie

Full member: €31 per month; Student member: €18 per month.