

Seat For Life

Application Form

Name: _____

Address: _____

Post Code: _____

Mobile Number: _____

Telephone Number: _____

Email Address: _____

example

Please enter details required in Block Capitals in the box below

IN LOVING MEMORY OF
STUART BODDY
1985-2011
GONE BUT NEVER FORGOTTEN

Please check that all details are correct as the plaque cannot be altered after your order has been processed

Print Name: _____

Signature: _____

Date: _____

Please Note:

** Admission charges to all games still apply

** Seat for Life does not guarantee availability of seat for any match

Paid by

Please Circle

Cash

Cheque

£100

Please make cheque payable to Shildon AFC

Please pass to any Director
with Payment

Office Use Only

Office Use Only		
Seat	Processed	Certificate