

SOCCER SCHOOLS PAYMENT FORM

Venue _____ Mini Kickers Junior Kickers

Date _____

1st Child's Name _____

Address _____

2nd Child's Name _____

Address _____

Email _____

Phone No. _____

Emergency No. _____

Supporter No. _____

Amount to be taken _____

Payment by Cheque

Cheque made payable to: Wolves Community Trust

Please return to: Wolves Community Trust, Molineux Stadium, Waterloo Road, Wolverhampton WV1 4QR.

Payment by Card

Type of Card: Master Card Visa Switch / Maestro Delta

Card Number

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

Valid from _____

Expires end _____

Issue No. (If Switch) _____

Security Code (last 3 digits on reverse of card) _____

Card Holder's Name _____

Card Holder's Address (If different from above) _____

Amount to be taken _____

Signed _____ Date _____