



ST.MIRREN INDEPENDENT SUPPORTERS ASSOCIATION

APPLICATION & STANDING ORDER FORM

Your Details

Name	<input type="text"/>	E-mail Address	<input type="text"/>
Address	<input type="text"/>	Home Phone No.	<input type="text"/>
	<input type="text"/>	Mobile Phone No.	<input type="text"/>
Post Code	<input type="text"/>	Tee Shirt Size	<input type="text"/>

Your Bank Account Information

Bank Name	<input type="text"/>	Sort Code	<input type="text"/>
Address	<input type="text"/>	Account No.	<input type="text"/>
	<input type="text"/>	Name on the Account	<input type="text"/>

Please Pay **SMiSA** - the Sum of **£10.00** (TEN POUNDS)
monthly into **Account 00094135, sort-code 30.25.83 at Lloyds TSB Alexandria**

starting on (date) and every month on the same date until further notice

Signature

SMiSA REFERENCE NUMBER (for office use only)

Please return completed form to

SMiSA
FREEPOST NAT 16290 (no stamp required)
PO BOX 5074
GLASGOW
G78 1BR