## **HASSRA** [Insert Region]

## **Cheque or BACS Payment Form**

Name:	HASSRA Membership No:
Location:	
Email:	Tel No:
Event:	Date:
<b>Cost:</b> £ [Insert Amount] per person. Please detail below competitor[s] covered by the payment being made:	
Please either:	
(a) Send a <b>Cheque</b>	e, made payable to HASSRA to: [Insert address]
(b) Confirm that you have arranged payment by <b>BACS</b> – account details below.	
Account Number:	HASSRA [Insert Region] [Insert Regional Details] [Insert Regional Details] First Initial & Surname - Event [e.g. A Smith - Golf]
Amount: £	<u>-•</u>
Signed:	Date/
IMPORTANT:	Email [Insert email address] or fax [insert fax number] this form to HASSRA [Insert Region] when your BACS payment has been actioned.
For HASSRA office	use only:
Information forwarded to Finance:	