**Contactless Payment Card Machine Notification Form**

|  |  |
| --- | --- |
| **Name of HASSRA Club** |  |
| **Name of Club Chair** |  |
| **Name of Club Treasurer** |  |
| **Name of Club Business Sponsor** |  |
| **Brand & Model of contactless card machine being used** |  |
| **Name of the person the machine is registered to** |  |
| **Names of other registered users** |  |
| **Site where the machine is normally kept** |  |

**Declaration**

I declare the machine:

* will always be kept securely in a locked draw when not in use.
* Will only be used for HASSRA business and **not** forpersonal use.

**Name**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Position**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(e.g. Club Chair)

**Date**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_