NEW SEASON TICKET HOLDERS ONLY



PLEASE COMPLETE YOUR DETAILS

FORENAME:	IL THE AND A DECIDENT OF A DECIDENTA DECIDO OF A DECIDA DECIDA DECIDA DE
SURNAME:	BERN
ADDRESS:	
	SEASONITICKET
	season ticket 2006-2007
POSTCODE:	MOBILE:
DAY TEL:	EMAIL:
EVENING TEL:	D/O/B:
PLEASE CHOOSE YOUR SEAT	
PLEASE INDICATE YOUR IST AND 2ND SEAT PREFERENCE (write 'I' or '2' in the relevant box)
FF Stand (upper tier)FF Stand (lower tier)West Stand (upper tier)	West Stand East Stand
YOUR TICKET -	
ADULT HIBS KIDS (UNDER 14)	
SENIOR CITZEN (F60/M65) HIBS KIDS (UNDER 5) 15 - 18 (OR F/T STUDENT) 15	
THE TICKET OFFICE WILL CONTACT YOU FROM 16 TH MAY	
OTHER SEASON TICKET OPTIONS	
CUP TOP UP ADULT £40	
CUP TOP UP CONCESSION £20	
HIBS KIDS MEMBERSHIP £10	YOUR TOTAL £
PLEASE CHOOSE YOUR PAYMENT METHOD	
CASH (please do not post)	
CHEQUE (Made payable to Hibernian FC)	
D/D PAYMENT PLAN (Please complete D/D form and return b	y 31 st March 2006)
SWITCH/SOLO/MASTERCARD/AMEX (Delete as appropria	ute)
CARD NO:	
VALID FROM:	EXPIRY DATE:
ISSUE NO (SWITCH ONLY)	

PLEASE COMPLETE ONE FORM PER PERSON. GROUP APPLICATIONS SHOULD BE SUBMITTED TOGETHER (PHOTOCOPIED FORMS ARE ACCEPTED) ALL APPLICATION FORMS TO:-HIBERNIAN FOOTBALL CLUB, EASTER ROAD STADIUM, 12 ALBION PLACE, EH7 5QG