

Roscommon GAA - Club Rossie SEPA Direct Debit Mandate

Unique Mandate Reference (UMR)	(for office use only)	
Creditor Identifier	IE22SDD360282	
Creditor's Name	Roscommon GAA	
Address	Racecourse Road	
	Roscommon	
City / Post Code	Ireland	
Country	lieidilu	

Legal Text: By signing this mandate form, you authorise (A) Roscommon GAA to send instructions to your bank to debit your account and (B) your bank to debit your account and (B) your bank to debit your account in accordance with the instructions from Roscommon GAA. As part of your rights, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank. A refund must be claimed within 8 weeks starting from the date on which your account was debited. Your rights regarding the above mandate are explained in a statement that you can obtain from your bank.

Please tick the membership which suits you best:

Gold Membership	3 payments of €76.66 per month		
Bronze Membership	3 payments of €33.33 per month		
Please complete all the fields marked *			
Your Name	*		
Your Address			
Your City / Post Code			
Your Country			
Your Account Number (IBAN)	*		
Your Bank Identifier Code (BIC)	*		
Type Of Payment	Recurrent Payment (as above) One-off Payment (Full amount) (Please tick V one box only)		
Date Of Signature	* D D M M Y Y Y Y Signature(s)		
Please Sign Here	*		

Please return this mandate form to Club Rossie, Roscommon GAA Offices, St Ciarans Road, Roscommon

Roscommon GAA Reference Number: