

S	po	ns	or	De	tails
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Name:	
Business Name	::
Website:	
Email:	
☐ Invoice	required for business tax deductions
Category	
Please select the fo	ollowing option:
	Player - \$400 19's Player - \$200

(Leave Blank if you would like us to select a player on your behalf)

Payment Options

Players Name:

Please circle one option:

Cash - EFTPOS - Bank Transfer

Bank Details: North Heidelberg SC Bendigo Bank

BSB 633-000 Acc No: 144534559

Reference eg. John Smith

Please return this form to club:

Warren Haysom - membership@northheidelbergsc.com.au or

In person: Bendigo Community Bank Oval, Shelley Street, Heidelberg Heights 3081