**Arsenal Football Club –Refund Request Form**

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| **Client / Company Name:** |  |
| **Membership No. (7-Digit) / Account No.:** |  |
| **Address:**House / Flat Number Name:Address Line 1Address Line 2TownCityPost CodeCountry |  |
| **Contact Name:** |  |
| **Contact Number:** |  |
| **Contact Email:** |  |
| **Amount to be Refunded:** |  |
| **Bank Account Details:**Bank Name:Bank Address:Account Name:Account Number:Sort Code:IBAN Number:Swift Code: |  |
| **Authorised By (Account Holder):** |  |
| **Finance Authorisation****(FD / Head of Finance / Fin. Controller)** |  |
| **Finance Contact Details** |  |

**Key Information for company-held accounts:** Details to be submitted to AFC either on company-headed paper or via email – if submitted via email, formal confirmation is also required from a second company signatory (Finance Director, Head of Finance or Financial Controller)