

SUBSCRIPTION FORM

Jersey Evening Post

Fill out form and return to:
Jersey Evening Post, Five Oaks, St Saviour Jersey JE4 8XQ

I would like to take out a **quarterly** **6 month** **annual** *(delete as appropriate)*

subscription to the **Jersey Evening Post** at a cost of:

£

I would like to take out a **quarterly** **6 month** **annual** *(delete as appropriate)*

subscription to the **Jersey Weekly Post** at a cost of:

£

Card Type: **VISA**    *(delete as appropriate)*

Card No:

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Expiry date:

M	M	Y	Y

Start date:

(Maestro & Solo)	M	M	Y	Y

Issue No:

(Maestro & Solo)	

Card holder's Name:

(exactly as it appears on card)

Statement Address:

Postcode:

Telephone Number:

Delivery Address:

(if different from above)

Postcode:

Cardholder's Signature: