

# SPREAD THE COST SEASON TICKET

25/26

Please read carefully. | All sections of this form must be filled out.

TICKET TYPE	SPREAD THE COST SEASON TICKET Payment from 1st May 2025			
	SEATING	QTY	STANDING	QTY
Adult	<b>£520</b> £40 deposit plus 12 payments of £40.00		<b>£430</b> £40 deposit plus 12 payments of £32.50	
Concession (Student & 60+)	<b>£430</b> £40 deposit plus 12 payments of £32.50		<b>£350</b> £35 deposit plus 12 payments of £26.25	
Child (15 & Under)	<b>£270</b> £30 deposit plus 12 payments of £20.00		<b>£200</b> £20 deposit plus 12 payments of £15.00	
Family 1 (2A + 2C)	<b>£1,400</b> £140.00 deposit plus 12 payments of £105.00		<b>£1,120</b> £100.00 deposit plus 12 payments of £85.00	
★ Season Ticket Card (£5pp)				

## SECURE YOUR SEAT FOR 30 GAMES

- Our Season Ticket will include 30 home games.
- First refusal on your seat at the pro rata rate of your season ticket for additional games.
- The club reserves the right to reschedule or substitute games included in season tickets.
- Season Ticket holders will receive a free digital pass for games, but can purchase an additional plastic card for £5pp.
- 10% off selected Swindon Wildcats merchandise
- 10% off HOT food at Franklins, on a match night
- Any missed direct debit payments will incur a £5 charge.
- The club reserve the right to move Season Ticket Seats to prevent single seats remaining between Season Ticket Holders.

### UNABLE TO ATTEND A GAME?

SELL BACK YOUR SEAT FOR A £10 FOOD OR MERCHANDISE VOUCHER, A STREAM OR A 26/27 TICKET CREDIT.

T&C's apply to all Season Ticket Benefits

## TERMS & CONDITIONS

### ELIGIBILITY & SIGN-UP

To qualify for the 12-month Spread the Cost option, you must submit your application between now and the **30th April 2025**. Once the application has been made, you'll need to complete your Spread the Cost direct debit between 1st April – 30th April 2025.

### PAYMENT SCHEDULE

- A deposit per ticket is required before your DD is set up.
- Applications can only be made for the Spread the Cost option between 1st April – 30th April 2025.
- The first monthly payment will be taken in **May 2025** and will run until April 2026
- Your recurring payment date will be set based on when your Season Ticket is processed on TicketCo.

By selecting the Spread the Cost option, you agree to these terms and conditions.

I have read the Terms & Conditions:

### CONTRACT TERM & CANCELLATION

- This plan requires a **minimum commitment of 6 months**. It cannot be cancelled within the first 6 months.
- If you cancel your season ticket it is invalid from the point of cancellation with no refunds
- Payment terms cannot be extended beyond the agreed 12-month period.

### ADDITIONAL TERMS

- If a payment fails, we will attempt to take the payment 2 more times. Failure to make a payment after these attempts could result in cancellation of your season ticket.
- The club reserves the right to amend these terms at any time.
- TicketCo have their own T&C's which you must agree to

I am a...  NEW Season Ticket Holder  RENEWAL Season Ticket Holder

CARD

I'm paying by...

DIRECT DEBIT

CASH

Date:

Signature:

# PRIMARY CONTACT DETAILS

(We will use this person to manage the application)

Please complete information for all Season Ticket holder applicants. These details will be used for the allocation of Season Tickets.

<b>NAME</b>	<input type="text"/> First Name	<input type="text"/> Last Name	<input type="text"/> DOB
<b>ADDRESS</b>	<input type="text"/> Address	<input type="text"/> Postal Code	<input type="text"/> Signature
<b>CONTACT</b>	<input type="text"/> Phone Number	<input type="text"/> Email Address	<input type="text"/> Block
			<input type="text"/> Row
			<input type="text"/> Seat

I'd like to receive emails from Swindon Wildcats with News, Club information and offers:

I would NOT like to receive emails from Swindon Wildcats with News, Club information and offers:



## ADDITIONAL SEASON TICKET APPLICANTS

2nd Applicant

<b>NAME</b>	<input type="text"/> First Name	<input type="text"/> Last Name	<input type="text"/> DOB
<b>CONTACT</b>	<input type="text"/> Phone Number	<input type="text"/> Email Address	<input type="text"/> Signature
	<u>For any child applicants, please use a parent/guardian's contact information.</u>		
			<input type="text"/> Block
			<input type="text"/> Row
			<input type="text"/> Seat

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3rd Applicant

<b>NAME</b>	<input type="text"/> First Name	<input type="text"/> Last Name	<input type="text"/> DOB
<b>CONTACT</b>	<input type="text"/> Phone Number	<input type="text"/> Email Address	<input type="text"/> Signature
	<u>For any child applicants, please use a parent/guardian's contact information.</u>		
			<input type="text"/> Block
			<input type="text"/> Row
			<input type="text"/> Seat

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4th Applicant

<b>NAME</b>	<input type="text"/> First Name	<input type="text"/> Last Name	<input type="text"/> DOB
<b>CONTACT</b>	<input type="text"/> Phone Number	<input type="text"/> Email Address	<input type="text"/> Signature
	<u>For any child applicants, please use a parent/guardian's contact information.</u>		
			<input type="text"/> Block
			<input type="text"/> Row
			<input type="text"/> Seat

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