



New Standing Order Instruction Form For Donations

Please Complete in BLOCK CAPITALS and in black ink. Please mark option boxes with a 'x'.

To _____ Bank/Building Society
Please set up the following Standing Order and debit/my our account accordingly

1. Account details

Account name _____ Account Number _____

Bank/Building Society Name _____ Sort Code _____

2. Payee details

Name of Charity Down Syndrome Training & Support Service Ltd

Payment reference (your name) _____

Sort Code 4 0 1 3 1 5

Account Number (person paying) 1 4 3 2 5 5 5 9

3. About the payment

How often are the payments to be made Weekly Monthly Yearly

Amount Details

Date and amount of first payment (DD/MM/YY) _____ £ _____ : _____

And there after on the _____ day of each week/month/yearly

Choose one of the following:-

Date of final Payment _____ Until further notice
(DD/MM/YY) _____

4. Confirmation

Customer signature(s)

Date (DD/MM/YY) _____

Please send this form to your bank to set up the Standing Order