STANDING ORDER MANDATE

To:	The Manager
Bank name:	
Bank	
address:	
Please pay:	Scarborough Disabled Swimming Group
	Account Number: 20252566
	Sort Code: 60 - 83 - 01
Quoting	
reference:	
("FD."	FD
followed by your full	
name)	
The sum of	
(in numbers	
and words):	
,	
Commencing or	n the day (eg 1st) ofin the yearand
thereafter every	month until further notice and debit my account accordingly.
Account	
name to be	
debited:	
Account	
number:	
Sort code:	
Signature:	Date:

Please send the completed form to your bank or building society