

New Standing Order



Please print, complete, sign and send this form to your bank

1	Your details:	
Name of Account		
Name of Bank		
Bank Address		
Sort Code		
Account Number		
Contact number		

2	Details of your standing order	
Monthly Payment	£	
Commencing		

3	Recipient	
Name of Account	The New Day Children's Centre	
Name of Bank	Lloyds	
Sort Code	30-19-54	
Account Number	03182313	

Signature

Print

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Print

Second signature (if required)

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