

STANDING ORDER MANDATE

Please complete all sections of this form in BLOCK CAPITALS

To (Name of Bank)

Address

Post Code

Account Holder(s)

Address

Post Code

Sort Code

Account Number

Signature: _____

Date: _____

Please pay the sum of

£

Monthly*

Quarterly*

Annually*

* Delete as appropriate

Commencing on

and thereafter until further notice

To: HSBC Bank plc,
69 Pall Mall, LONDON SW1Y 5EY

Parish/School:

Sort Code

Account Number

4 0 0 5 2 0

Please quote Gift Aid Declaration Reference Number[‡]:

Please cancel existing monthly/quarterly/annual[‡]
standing order for the above account for

£

[‡] Organiser to insert GAD Number and old standing order amount before sending to bank

Please return this form once completed to the Gift Aid Organiser