

STANDING ORDER INSTRUCTION : St. Michael's School

To the Manager

Your Bank name:	
Your Bank address:	
	Postcode:

I hereby authorise and request you to debit my account

Account name:	
Sort code:	
Account number:	
Amount:	£
Frequency:	Monthly
Beginning date:	
End date: (or write "until further notice")	

And credit

St. Michael's School Harts Lane Burghclere Hampshire RG20 9JW	Sort code: 30-99-80 Account number: 00279661
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Quoting reference (insert your name)

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Signed:	Date:
Email:	

Please return this form by post to the address below