



Registered Charity Number 229662

Standing Order Form

(Please write clearly in capital letters. All sections must be completed)

To: The Manager (please insert the details of your bank branch name and address below)

Sort Code

Account number

[_] [_]

2. Standing Order Details

Does this instruction replace an existing Standing Order or Direct Debit instruction? Yes / No

*delete as appropriate.

Please pay the amount indicated below to Augustinian Care through their branch Barclay's Bank, Lewes Branch, Sort Code 20-49-80, Account Number 90748684

I would like to donate the sum of £ (amount in figures and words) to Augustinian Care every week/month/quarter/year* (please delete as appropriate) until further notice. I would like the first payment to start from (please enter the date you would like the first payment to be made. We suggest you allow at least one month between the date of signing the form and the first payment).

Name _____

Address _____

_____ Post Code _____

Email _____ Tel No _____

I authorise you to debit my/our account in accordance with the details above.

Signed _____ Dated: _____

This request is addressed to the bank which holds my/our account.

Please return to: Fundraising Manager, Augustinian Care, St. George's Retreat, PO Box 1, Burgess Hill, RH15 0SQ.