



Standing Order Form

Tick the box to add an extra 25p to every £1 you give at no extra cost

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Yes, I pay tax in the UK. Please treat all donations I make to youth-SHINE and for the future further notice.

(You must pay income tax/capital gains tax at least equal to the amount of tax reclaimed on your donations.)

Full Name:

Address:..... Post Code:

Date: / /

Please send this form once completed to the address below Office Reference:

1 Your account details

Name

Bank Name

Address

Bank Address

Account No.

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Sort Code

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2 Details of the account where payments will be sent to

Name

Bank Name

Address

Bank Address

Account No.

0	1	2	5	9	3	0	1
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Sort Code

3	0	0	0	8	3
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3 Payment Details

Regular Amount

£

Frequency

Choose 1 option by ticking one of the boxes

Date of first payment

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 Weekly

 Monthly

I would like to donate

£5 £10 £50 £100

Other _____

Signature

Continue Payment until cancelled by

- tick box