

Association of Friends of Prince Michael of Kent Court

To: (Bank name & address)

Please Pay

Bank	Sorting Code Number
CAF BANK LTD. (a subsidiary of the Charities Aid Foundation)	4 0 - 5 2 - 4 0

For the Credit of

Beneficiary's Name	Account Number	Reference *
ASSOCIATION OF FRIENDS OF PRINCE MICHAEL OF KENT COURT	0 0 0 3 6 1 6 1	

The Sum Of

Amount in figures	Amount in words
£	

Commencing

Date of first payment	Amount of first payment
	£

and thereafter every

Due date and frequency
Yearly

Until further notice

Name of account to be debited	Account number										
	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> </table>										

Name(s) _____
BLOCK CAPITALS PLEASE

Signature _____

Address _____

Signature _____
For joint accounts where both signatures are required

Postcode _____

Date _____ 20

* **Reference :-** In order for us to be able to trace your payment and give you credit for your kind membership we need a Reference on the standing order mandate, i.e. Lodge Name & Number and a letter indicating the Province: **B** (Bedfordshire) **H** (Hertfordshire) **M** (Middlesex) **L** (London) if relevant

**AFTER COMPLETION PLEASE FORWARD THIS FORM TO THE MEMBERSHIP SECRETARY
(Doug Brodie, 25 Park Crescent, Elstree, Herts WD6 3PT)**