|  |  |  |
| --- | --- | --- |
| Account the payments will be made from (debit account): (Note 1) Bank:     (Note 2) Branch:       |  | Account the payments will be made to (payee’s account):Bank: Danske BankBranch: Downpatrick  |

Please make payments as set out in this standing-order mandate form. (You must fill in the fields which have a \* next to them.)

 **Sort code Account number (see note 3)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| (Note 3)Debit account  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Payee’s account  | 9 | 5 | 0 | 6 | 7 | 9 |  | 5 | 0 | 1 | 8 | 8 | 8 | 9 | 1 |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| First payment date  | 3 | 1 | 0 | 3 | 2 | 0 |

|  |  |  |
| --- | --- | --- |
| How often? \*  | x | Every year |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Payment-free months | x | January | x | February |  | March | x | April | x | May | x | June |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | x | July | x | August | x | September | x | October | x | November | x | December |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Last payment date | D | D | M | M | Y | Y |  | Or | Number of payments | Until Cancelled |

|  |
| --- |
|  Amount \* £15.00  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Payee’s name \* | N | E | W | C | A | S | T | L | E |  | A | C |  |  |  |  |  |  |

 (The payee is the person the payment is being made to.)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Payee’s reference\* |  |  |  |  |  |  |  |  | A | N | I |  |  |  |  |  |  |

Account name: Community Account

Customer’s signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Customers Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Notes –**

1. Your Banks name
2. Branch Location
3. Your bank account

Payee Reference is NI Athletics Membership number