

# STANDING ORDER FORM

**ALL SECTIONS MARKED \*\* MUST BE COMPLETED. PLEASE USE CAPITALS.**

## 1. DETAILS OF THE ACCOUNT WHERE PAYMENTS WILL COME FROM

Your Bank/Building Society Name (Below)	Your Account Number <b>**</b>								
**	Your Sort Code <b>**</b>								
Your Account Name (Below)									
**									

## 2. DETAILS OF THE ACCOUNT WHERE PAYMENTS WILL BE SENT TO

Account Name	Name of Bank or Building Society								
QUEEN ALEXANDRAS ROYAL NAVAL NURSING SERVICE ASSOCIATION	SANTANDER BUSINESS BANKING								
	Branch								
	BOOTLE, MERSEYSIDE L30 4GB								
Enter Your Reference (Below)	Account Number	1	7	6	5	9	4	0	1
Your full first name/s and surname please	Sort Code	x	x	0	9	0	1	5	1
**									
If you are Joining from outside of the UK, you will need the information opposite -	BIC:- ABBY GB2LXXX								
	IBAN:- GB90ABBY09015117659401								

## 3. PAYMENT DETAILS

Regular amount (in figures)	£10-00								
Date of first payment (enter year) <b>**</b>		1	5	0	3	2	0		
Frequency	Annually								
Continue payments until cancelled by me in writing (mark box with X)									x

## 4. SIGNATURE **\*\***

**SIGNATURE (if necessary for joint account) **\*\*****

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## 5. DATE **\*\***

					2	0		
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**PLEASE MAKE SURE THIS FORM IS GIVEN/SENT TO YOUR OWN BANK OR THE INFORMATION IS USED TO ACTIVATE YOUR STANDING ORDER VIA ONLINE BANKING.**