





## STANDING ORDER FORM

CUSTOMER ACCOUNT D	<u>DETAILS</u>			
ACCOUNT NAME(1)		ACCOUNT NAME	ACCOUNT NAME(2)	
BANK/BUILDING SOCIET	ΓΥ	SORT CODE	//	
NAME		ACCOUNT NUM	ACCOUNT NUMBER	
SET UP NEW STANDING	<u>ORDER</u>			
Beneficiary Details (Wh	o do you want to pay?)			
SORT CODE	20/76/92	BENEFICIARY NAME	ALBION SPORTS CIC	
ACCOUNT NUMBER	93816753	REFERENCE		
BANK NAME	<u>BARCLAYS</u>		(Player Name & DOB)	
PAYMENT DETAILS  AMOUNT OF MONTHLY PAYMENT £16.00 REGULAR MONTLY PAYMENT OF EVERY MONTH				
AUTHORITY COUNTERS	IGNATURE(s)			
PLEASE ENSURE YOU SI	GN AND DATE THE FOI	RM		
(WHERE JOINT BANK ACCOUNT, BOTH PARTIES MUST SIGN BELOW)				
CUSTOMER SIGNATURE(S)				
CUSTOMER PRINT NA	ME			
CUSTOMER CONTACT TELEPHONE NUMBER				
DATE				

(PLEASE SEND FORMS TO BALLY SINGH, 65 ROCKWOOD CRESECENT, CALVERLEY, LEEDS , LS28 5AD