**New Standing Order Instruction**

Please note – when filling out this form please complete all blank sections in BLOCK CAPITALS

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Bank

Please set up the following Standing Order and debit my/our account accordingly.

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**1. My/our account details**

Account name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Account number

Account holding branch\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sort code

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2. Payee details**

COLWYN BAY CATHOLIC CHURCH

Name of person or organisation you are paying

Payment reference (if known) – this will appear on the

bank statement of the person or organisation you wish to pay (max 18 characters)

Sort code – the bank code of the person or

5 5 8 1 4 2

organisation you are paying

Account number – the account number of the person

0 8 1 4 2 6 3 7

or organisation you wish to pay

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3. About the payment**

How often are the Weekly ☐ Two weekly ☐ Four weekly ☐ Monthly ☐

payments to

be made Quarterly ☐ Half yearly ☐ Yearly ☐

Amount details

**£**

Date and amount of first payment (DD/MMM/YY)

(Please allow 3 working days for receipt)

**£**

Date and amount of ongoing payments (DD/MMM/YY)

(if different from the first payment)

Choose one of the following two options

1. Date and amount of final payment (DD/MMM/YY)

**£**

2. Until further notice ☐ (payments will be made until you cancel this instruction)

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**4. Confirmation**

Signature(s)

Date (DD/MM/YYYY)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Wrexham Diocesan Trust Registered Charity No. 700426 Colwyn Bay Catholic Church