

STANDING ORDER FORM

Please make the payments detailed below and debit my/our account.

The sum of £25.00..... £75.00.....(tick as applicable)

Date of first payment/...../..... and thereafter on the same day of each succeeding year until further notice to:

John Armitage Memorial Trust Registered No. 1096150
Sort code: 40-52-40 A/c number: 00088989
CAF Bank Ltd, PO Box 289, Kings Hill, West Malling, Kent ME19 4TA

Name of a/c holder(s):

A/c number:

Bank Name: Sort Code:/...../.....

Bank Address:

..... Postcode:

Signature:..... Date/...../.....