

REGULAR GIVING STANDING ORDER FORM



REVIVE CHURCH
New Mills

To the Manager
(of your bank)

I/we hereby authorise and request you to debit my/our

Account Name*	
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Please ensure that the actual name on/of the account is included in this box so that we can accurately match your payment to our records. Please deliver this form to your local bank branch.

Account Details

Sort Code	Account Number	Amount	Frequency
		£	Monthly

Beginning Date

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And Credit

Revive Church

Sort Code Account Number

30-98-12	00934680
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Ref:(Surname please)

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Signed

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Print Name Block Capitals

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