



Standing Order Form Set Up Form
BOYNE RUGBY FOOTBALL CLUB
Lotto Standing Order Form



To the Manager

Branch Address

I/We hereby authorise and request you to debit my/our account
(Details of the account from which payments will be made)

Account Name

BIC
(optional from Feb 1st, 2016)

IBAN

And to Credit the Beneficiary/Receiver account
(Details of the account to which payments will be made)

Account Name

BIC
(optional from Feb 1st, 2016)

IBAN

*Beneficiary/Receiver Reference

MEMBER'S NAME
Reference will appear on Beneficiary/Receiver statement

Start Date
(cannot be historic)

Frequency Weekly Fortnightly Monthly
 Quarterly Annually Other

Number of Payments

Amount

Signature Date

Signature Date

Please allow 5 working days prior to the first payment due date

Please return the completed form to Boyne RFC