



River Deben Association

**Membership Application Form Mandate**

**BANK STANDING ORDER**

To: The Manager

Name and Address of your bank: \_\_\_\_\_

\_\_\_\_\_

Please pay River Deben Association, Lloyds Bank plc, 8 Thoroughfare, Woodbridge IP12 1AF, sort code 30-99-85 account no 07128433 the sum of £ \* now and annually until further notice and debit my account.

YOUR FULL NAME: \_\_\_\_\_

BANK SORT CODE: \_\_\_\_\_ YOUR ACCOUNT NO: \_\_\_\_\_

YOUR REFERENCE: \_\_\_\_\_

(Full name please so we can distinguish your payment from others with the same surname)

SIGNED: \_\_\_\_\_

DATE: \_\_\_\_\_

**\*Subscription rates: Individual £6.00 / Couple £10.00 /**

**Household £12 / Organisation £15 / Overseas £20**

**– please circle as appropriate**