

Standing Order Form - Fees

Please complete the details below and then return the top to Gym Club and take the bottom to your bank.

Name of Gymnast:

Name of Parent/Carer:

Address:

.....

Name on Bank Account:

Bank Name:

I agree to pay my son/ daughter's monthly fees by standing order.

I understand that the monthly rate will be £..... Starting from:

Signed: Date:

Please set up the following standing order and debit my/our account accordingly.

To:Bank/ Building Society.

Postal Address:

.....Post Code:

Account Name:

Account Number: _ _ _ _ _

Sort Code: _ _ - _ - _

Please Pay: Carlisle Gymnastics Club
HSBC
Carlisle City Office
29 English Street
Carlisle
CA3 8JT
Sort Code: 40 – 16 – 22
Account Number: 81532812

Payment Reference: (Child's Name)

(Must be quoted at all times.)

The Sum of: £.....

Amount in words:Pounds

Commencing: 20th

And thereafter: Monthly on the 20th

Signature:

Date: