Standing Order Form

Your details						
Name (Mr, Mrs, Miss, Ms, Dr, Other): Address:						
Postcode:						
Telephone:						
Email:						
Yes, I would like to	give Seed	s for Change	Lancaster Co-	operative Ltd each:		
month / quarter / ye	ar (delete a	s appropriate)				
the amount of:	£15	£25	£50	Other: £		
Starting on:	tarting on:// 200 _ (day/month/year) until further notice.					
Signature:				Today's date:		
Your bank or bui	Iding soci	iety details				
Bank name:						
Bank full address:						
Bank postcode:						
Sort Code:						
Account Number:						
Bank Use Only						
To the Bank Manag	er: Please p	ay as detailed	above to:			
Sort Code 08-92-99 Please quote ref: do		of Account N	umber 656592 4	17		

Please return this form to Seeds for Change, Storey Institute, Meeting House Lane, Lancaster LA1 1TH

Please do not send this form to your bank