



### STANDING ORDER MANDATE

Please complete all the top section of this form in BLOCK CAPITALS

To (Name of Bank)	
Address	
Postcode	
Account Holder(s)	
Address	
Postcode	

Sort Code					

Account Number							

Please pay the sum of	£	<b>Monthly*</b>	<b>Quarterly*</b>	<b>Annually*</b>
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\*Delete as appropriate

Commencing on		and therefore until further notice
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Signature:	Date:
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**For Pilgrimage Office Use Only:**

The Gift Aid Organiser to complete if applicant has completed a Gift Aid Declaration (GAD).

To: HSBC Bank plc, 69 Pall Mall, London, SW1Y 5EY	A&B Lourdes Pilgrimage
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Sort Code					
4	0	0	5	2	0

Account Number‡							

Reference please quote: Gift Aid Declaration Number, if applicable‡					
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‡Pilgrimage Office to complete Trust Account Number and GAD Number before sending to the bank.

Please return this form once completed to the Arundel & Brighton Lourdes Pilgrimage Office  
St. Philip Howard Centre, 4 Southgate Drive, Crawley RH10 6RP