

ISLANDEADY GLENISLAND PARISH STANDING ORDER FORM

*This can be set up electronically via online or phone banking or
OR post the completed form to your bank*

To the Manager of (name of your bank) _____

Address (of Bank): _____

I/We hereby authorise and request you to debit my/our account:

Account Name: _____

Sort Code: _____

BIC: _____

IBAN: _____

BENEFICIARY

REFERENCE: _____

(Please insert your name here so your donation can be identified on the Parish Bank account)

and to Credit " **Islandeady Glenyland Parish " account:**

Account Number :

11650471

Sort Code :

90-37-44

IBAN:

IE53 BOFI 9037 4411 6504 71

BIC:

BOFIE2D

Amount : € _____

Frequency: Weekly

Monthly

Please tick relevant box

START DATE : _____

END DATE: _____

Signature: _____

Date: _____

Signature: _____

Date: _____

(In cases where 2 signatories are required)

*In order to allow **Islandeady Glenisland Parish** acknowledge receipt of your standing order, if you wish, please email brennan2islands@gmail.com notifying us of your contact details, standing order amount and frequency. Any information that you communicate to **Islandeady Glenisland Parish** will be kept securely in accordance with GDPR.*

**THIS FORM IS TO BE SENT TO YOUR BANK, IF NOT USING ONLINE BANKING.
PLEASE DO NOT SEND IT TO THE PARISH.**

Thank you for your kind donation.