



STANDING ORDER

To: The Manager

(Please enter the branch details below)

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

Account Name	
---------------------	--

Sort Code	Account Number	Amount	Date	Frequency <small>Please delete as appropriate</small>

Annual membership subscriptions should be made on 1 October

Start Date	End Date	Number of Payments	Until otherwise notified
			Yes/No <small>Please delete as appropriate</small>

Account to be credited

Account Name	Rye, Winchelsea & District Memorial Hospital Ltd		
Sort Code	40-39-18	Account Number	31052225
Reference	[Your name] Donation and/or [Your name] Membership		

Signature Date

Please ensure that all relevant boxes are completed and any alterations are initialled

If you wish to Gift Aid this donation please complete one of our Gift Aid Declaration forms or contact our Company Secretary on 01797 228842

Incorporating The Friends of the Hospital at Rye

Registered Charity No. 1014232
 VAT Registration No. 8796884 30. Registered in England with limited liability no. 2740665
 Registered Office: The Memorial Care Centre, Peasmarsh Road, Rye Foreign, Rye East Sussex TN31 7UD

Email: fundraising@ryehospital.org.uk

Website: www.ryehospital.org.uk