



# Standing Order

**Please complete this form and return it to:**

The Treasurer  
The Manx Stroke Foundation,  
Thie Corneil,  
Tynwald Road, Peel  
Isle of Man,  
IM5 1JP

### Your Details

Name: .....

Address: .....

Postcode: .....

Telephone: .....

### Your Bank Details

Bank Name: .....

Address: .....

Sort Code: \_/\_/\_

Account Number:

Name of Account Holder (s): .....

Please pay *The Manx Stroke Foundation*

Barclays Bank **Sort Code:** 20-26-74 **Account No:** 00485810

Amount: £ \_\_\_\_\_  
(In figures)

Amount: \_\_\_\_\_  
(In Writing)

Commencing Date\* \_\_\_\_\_ Month \_\_\_\_ / \_\_\_\_ Year \_\_\_\_\_  
(date of first payment)

*\*this date should be at least one month from today's date*

Thereafter                      Monthly                      Quarterly                      Annually  
(please circle one)

Signature(s): \_\_\_\_\_ Date: \_\_\_\_\_