

SRFC Membership Standing Order Form

To: the Manager

Bank Name: _____
Bank Address: _____

Sort Code: _____
Account No.: _____
Account Holder: _____
Holder Address: _____

Ref: _____ 'Account Holder Name'

Please debit my account monthly (until further notice) with the amount stated below starting on the 1st day of _____ 2011.

FAMILY	FULL	ASSOC	STUDENT
€22	€14	€11	€9

Tick appropriate box

Payment in words: _____

And pay to:

**SRFC Memberships Account
A.I.B. Sutton Cross
Dublin 13.
Sort Code: 93-23-61
Acc. No.: 19570214**

Signature: _____

Date: _____

PLEASE ENSURE YOUR NAME IS QUOTED IN THE REFERENCE FIELD