

Standing Order Mandate to first4healthtraining.com Ltd.

Prices and discounts are based upon a Standing Order having been completed, signed and returned to the address below.

Name of Bank.....

Address

.....

Please tick relevant box:

- New Instruction
- Please amend previous Standing Order quoting reference/beneficiary

ACCOUNT TO BE DEBITED

SORT CODE

ACCOUNT NUMBER

ACCOUNT NAME

SERVICE TAKEN

BENEFICIARY DETAILS

BANK

BRANCH DETAILS

SORT CODE

ACCOUNT NUMBER

BENEFICIARY NAME

REFERENCE

PAYMENT DETAILS

AMOUNT OF FIRST PAYMENT £

DATE OF FIRST PAYMENT

AMOUNT OF USUAL PAYMENT £

AMOUNT OF USUAL PAYMENT IN WORDS

TO BE PAID

- MONTHLY QUARTERLY ANNUALLY

DATE OF USUAL PAYMENT

AMOUNT OF LAST PAYMENT £

DATE OF LAST PAYMENT

OR PLEASE CONTINUE PAYMENT UNTIL FURTHER NOTICE

CUSTOMER SIGNATURE(S) DATE

CUSTOMER CONTACT TELEPHONE NO:

All boxes must be completed in order for the standing order to be processed

Return address –

first4healthtraining.com Ltd, Croft House, 59 Fair View, Carleton, Pontefract, West Yorkshire WF8 3NU