100 CLUB SIGN UP

MEMBERSHIP NUMBER (admin use only)	
PREFERRED LOTTERY NUMBER(S) (allocated)	ated if available)
Name (to which payment will be made should you win)	
Contact details (so we can communicate with you)	
Telephone no (daytime)	(evening)
Email address	
Home address	
Delete as applicable I/we understand that Friends of Holy Trinity Academy will forward t Order Mandate to the bank indicated and that £2 / £4 a month or £2 applicable) by Standing Order will be paid into the 100 Club account unto therwise.	24 / £48 annually (delete as
I/we agree that if we wish to cancel this order I/we will also inform Academy of this decision.	Friends of Holy Trinity
Signature	
Date:	

Please return this form together with your completed Standing Order Mandate

to F.O.H.T. - Victoria Tolfts, c/o School Office

<u>Don't forget to sign</u> the Standing Order mandate!!

If you have any questions, please email Victoria Tolfts at virolinson@gmail.com

THANK YOU FOR YOUR SUPPORT AND GOOD LUCK!

STANDING ORDER MANDATE		
YOUR DETAILS:		
E un		
Full Name: Address:		
Address.		
	Postcode:	
Dowle Name of		
Bank Name: Bank Address:		
Barik Address.		
	Postcode	
Sort Code No: Your Account Number:		
Recipients name Friends of Holy Trinity Academy Recipients bank and branch name Lloyds Bank, Butler Place, Chelmsford, Essex CM1 1JS		
Recipients Sort Code No. 30-98-97	Recipients Account No. 44477760	
Date of first regular payment	Amount and frequency thereafter (pls tick)	
2022	£2 monthly	
	£4 monthly	
Payment Reference (Initial and Surname	£24 annually £48 annually	
Until further notice in writing		
Signature	Date	
	via your online banking, Please tick this box vill forward this form to your Bank.	