



STANDING ORDER MANDATE FOR MEMBERSHIP FEES

Please complete with YOUR bank details in BLOCK CAPITALS and enclose with membership renewal/application

To: Bank
Address:
.....

Please pay (please leave blank)
On 10TH OF EVERY MONTH STARTING FROM (specify current month)
AND THEREAFTER EVERY MONTH UNTIL FURTHER NOTICE

Account No.:
Account Name:
Sort Code:

To Beneficiary: THE PLAYHOUSE CHELTENHAM
Bank: NAT WEST, CHELTENHAM BRANCH, 31 PROMENADE, CHELTENHAM GL50 1LH
Sort Code: 60-05-16
Account Name: THE PLAYHOUSE THEATRE CHELTENHAM BUSINESS CURRENT ACCOUNT
Account No.: 18778410

I hereby authorise the above payment. Please cancel any previous standing order or direct debit in favour of the above beneficiary.

Signed: Dated: