

# Standing Order Mandate – Season 2018/2019

**(Complete this page and send this to your bank)**

To: \_\_\_\_\_ Bank (insert the name of your bank)

## 1. Account Details (Your Account Details from which the payment is debited)

Please set up the following Standing Order and debit the account below as follows:

Account Name		Account Number	<input type="text"/>
Branch Name		Sort Code	<input type="text"/>

## 2. Payee Details (Recipient Organisation you are paying)

Bank	Ulster Bank Ballymoney	Account Name	Ballymoney United Youth Academy
Account Number	<input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/> <input type="text" value="7"/> <input type="text" value="6"/> <input type="text" value="3"/> <input type="text" value="3"/>	Sort Code	<input type="text" value="9"/> <input type="text" value="8"/> <input type="text" value="-"/> <input type="text" value="0"/> <input type="text" value="3"/> <input type="text" value="-"/> <input type="text" value="9"/> <input type="text" value="0"/>
Payee Reference	<input type="text" value="B"/> <input type="text" value="U"/> <input type="text" value="Y"/> <input type="text" value="A"/> <input type="text" value="-"/> <input type="text"/> <input type="text" value="-"/> <input type="text"/> <input type="text"/>		

*Payee Reference: BUYA – Age Group - Child's Initials (e.g. BUYA-09-JWB for Joseph William Bloggs in the 2009 age group)*

## 3. Payment Details

Payment Frequency	Monthly (8 payments)	Monthly Debit Amount	£ <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
Date of first Payment	<input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="-"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="-"/> <input type="text" value="1"/> <input type="text" value="8"/>	Date of Last Payment	<input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="-"/> <input type="text" value="0"/> <input type="text" value="4"/> <input type="text" value="-"/> <input type="text" value="1"/> <input type="text" value="9"/>

## 4. Agreement & Confirmation

This request is addressed to the bank which holds my/our account and I authorise you to debit my/our account, in accordance with the above details.

Signature(s)

Date

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Complete this form and return to BUYA Coach

## 5. Player's Details

Player's Full Names	
Player's Address	

### Training Fees

£10 Per Member per Calendar Month – training 1 night  
 £15 Per Member per Calendar Month – training 2 nights

Additional Fee may exist if training lasts more than an hour per evening.

## 6. Payment Details

I confirm that the standing order mandate form has been sent to my bank.

I have instructed my make to debit my account for 8 monthly payments from September 2018 to April 2019 with the amount

£			.		
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Payee Reference	B	U	Y	A	-		-		
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*Payee Reference: BUYA – Age Group - Child's Initials (e.g. BUYA-09-JWB for Joseph William Bloggs in the 2009 age group)*

Comments:

signature

Date