

## **REQUEST FOR MONTHLY STANDING ORDER to the Chew Valley Performing Arts Centre**

To the	Manage	r		
Bank				bank name
Address				bank address
			Post code	
From:	Accoun	t name:		name on your account
Account num		t number:	your account number	
Sort code:		de:	your bank sort code	
on the 7th day of eacontinuing thereafted  Please Pay to:  Ban  Bra  Sor		of each month		. (date of first payment) and
Please	quote th	e following ref	erence when making this payme	nt (in the format: 2C+my name)
Standir	ng order i	reference: 2C		
Signed:	:			
Data				