## Friends of Birkenhead Park



Payment

The Friends of Birkenhead Park c/o The Visitor Centre Park Drive Birkenhead CH41 4HY

Standing Order Mandate		
Your details:		
Full Name: Address:		
	Postcode:	
Bank Name: Bank Address:		
	Postcode:	
Sort Code No:	Your Account Number:	
Please pay: The Friends of Birkenhead Park  Recipients name Friends of Birkenhead Park	Recipients bai <b>Santande</b> r	nk
Recipients Sort Code No. <b>09-01-50</b> Date of first regular payment	Recipients Account No. <b>04348362</b> Amount and frequency thereafter	
	£5 annual membership	Annually
	Donation of £	Monthly* Annually*
Reference (Initial and Surname) FOBPM		elete as appropriate.
Jntil further notice in writing		
Signature:	Date:	