

DYSPRAXIA FOUNDATION

MEMBERSHIP SUBSCRIPTION STANDING ORDER FORM



To: The Manager _____ Bank PLC

Branch Address _____

_____ Post Code _____

Please pay to NatWest Bank, 12 High Street, HITCHIN, Herts SG5 1YY

Dyspraxia Foundation Account No. 17063701 Sort code 60-11-10

The Sum of £ _____ In words _____

Starting on the first day of _____ 20..... and thereafter on the

5 April each year until further notice debiting such payments to my/our account.

Account No Sort Code

Account Name _____

Signed _____ Date _____

Printed Name _____

Address _____

_____ Post Code _____

GIFT AID DECLARATION

I am a UK taxpayer and wish my donation/subscription to be treated as Gift Aid from the date of this declaration until I notify you otherwise.

Signed _____ Date _____

Thank you for your support

DYSPRAXIA FOUNDATION

8 West Alley, Hitchin, Herts SG5 1EG Tel: 01462 454986 Fax: 01462 455052

Registered Charity No 1058352 Company No 3256733

Office Use Only: Ref: _____