

## Friends of Walton Parish Nursing

Title..... Forename.....

Surname.....

Address.....

.....

Post code.....

Phone Number.....

Email.....

I enclose the completed and signed Bankers Standing Order **OR**  
I enclose a cheque for £..... made payable to **Walton Parish Nursing, Felixstowe**

### Gift Aid declaration:

I want the charity to treat the donations that I pay from the date of this declaration until I notify you otherwise as Gift Aid donations.

I am a UK taxpayer

Signature: .....

Date.....

**STANDING ORDER MANDATE**

**To the Manager**

(Name of bank): .....

Address of bank: .....

.....

Post code.....

**Please pay:**

CAF Bank Ltd 25 Kings Hill Avenue, Kings Hill, West Malling, Kent ME19 4JQ

**For the credit of:** Walton Parish Nursing, Felixstowe

Bank sort code: 40-52-40

Account Number: 00023393

**The sum of** (in words). ..... Pounds  
(£.....)

On the..... (day).....(month).....(year)

And thereafter every month until further notice and debit my account accordingly.

**Name of account holder to be debited:**

.....

**Account Number Sort code:** .....

Title..... Forename.....

Surname.....

Address:.....

.....

Post code.....

Signature: .....

Date.....

When completed, please return to Walton Parish Nursing, c/o Maidstone Road Baptist Church, Walton, Felixstowe IP11 9ED. We will then send this form on to your bank.

Thank you.