



Standing Order Form

Please write clearly in the spaces provided.

Your full name

Sort Code

 :

Account No. (to be debited)

Your Contact Telephone Number

Bank Name

Branch Name

Details of your standing order

Recipients name – **LGBTNOISE**

Recipients Bank and branch name – **AIB, Lower Baggot Street**

Recipients sort code and account number – **93-10-12 24216022**

First payment date.

 / /

Payment amount

 € :

Payment amount in words

Frequency of payment (delete as necessary)

Monthly / Quarterly / Yearly

Your signature(s)

Date

Please send to your bank or the address below and we will send it to your bank.