HALL COURT VETERINARY GROUP

Standing Order Mandate

Your Banks Details

Bank Name :.....

Bank address :.....

.....

Your Banking Details (relating to account to be debited)

Full Name: .....

Sort Code: .....

Account Number: .....

Quoting reference (Your surname/client number*).....

Amount to be debited each month: £.....

Amount to be debited in words: .....

Date of first payment to be made: ...../...../.....

Date of Each month I would like further payments to be made (eg. 1st of each month): .....

*For details on your client number- please ring/ ask at reception on 01909562319.

Your Personal Details

Your Name: .....

Your Address: .....

.....

.....

Contact Telephone Number: .....

Signature: ..... Date: ...../...../.....

Our Banking Details

Name on Account: Hall Court Dinnington Limited

Bank Name: Lloyds Bank

Sort Number: 30-97-51

Account Number: 65822068

PLEASE NOTE: TERMS AND CONDITIONS DO APPLY.

PLEASE RETURN THIS FORM TO THE PRACTICE FOR PROCESSING, WE WILL FORWARD IT TO YOUR BANK.