



# SAN SHOU KUAN

Annual Membership standing order form

Please tick relevant box

Set up a new standing order (please complete <b>section A</b> )	<input type="checkbox"/>
Amendment to existing standing order (please complete <b>section B</b> )	<input type="checkbox"/>
Cancel an existing order (please complete <b>section C</b> )	<input type="checkbox"/>

### Customer Account Details

Account Name(s):	<input type="text"/>	Account number:	<input type="text"/>
	<input type="text"/>	Sort code:	<input type="text"/>
Bank:	<input type="text"/>	Branch name:	<input type="text"/>
Branch address:	<input type="text"/>		

### Beneficiary Details - Who you want to pay

Organisation:	<input type="text" value="San Shou Kuan"/>	Account number:	<input type="text" value="19196668"/>		
Payment Reference:	<input type="text" value="AM"/>	Sort code:	<input type="text" value="30"/>	<input type="text" value="93"/>	<input type="text" value="79"/>
(AM+membership Number [if known] or AM+your initials/surname E.g. AM0233 or AMJsmith)					
Type of membership:	<input type="text"/>	(individual, family, couple, child etc)			

### Section A - Set up a new standing order

		DD	MM	YYYY
Amount of first payment	£ <input type="text"/>	Date of first payment	<input type="text"/>	<input type="text"/>
Amount of usual payment	£ <input type="text"/>	Date of last payment	<input type="text"/>	<input type="text"/>
Frequency of Payment	Annually until further notice			

### Section B - Amendment to existing standing order

Amend payment amount from	£ <input type="text"/>	TO	£ <input type="text"/>
Amend payment date from	<input type="text"/>	TO ( DD/MM/YYYY )	<input type="text"/>
Amend payment frequency from	Annually	TO	<input type="text"/>
Any other amendments	<input type="text"/>		

### Section C - Cancel an existing standing order or Direct Debit

Please advise direct debit originator of cancellation

I wish to cancel with effect from

Any other cancellation details

### Declaration

By signing I agree to pay my membership to San Shou Kuan on an annual basis by standing order.

Customer Signature(s)	<input type="text"/>	<input type="text"/>
Customer Contact No.	<input type="text"/>	Date: <input type="text"/>

Please return the completed form to your San Shou Kuan instructor or local bank  
**All boxes must be completed in order for your request to be processed**

