



New standing order

Please write clearly in the white spaces with capital letters or cross the boxes. All sections must be completed.	Please return the original form as photocopies are not acceptable. Important – we cannot set standing orders or direct debits up on savings accounts.
1 Your details	
Your full name or name of business Your contact telephone number	Sort code (being debited) Account number (being debited) Branch name
2 Details of your standing order	
Does this instruction replace any existing standing order or direct debit instructions? If yes please give details in special instructions below. Recipient's name MARGATE LAWN TENNIS CLUB 100 CLUB Recipient's bank and branch name Lloyds Bank, Birchington Recipient's sort code Recipient's account number 3 0 9 5 4 5 0 0 1 4 3 0 3 8 First payment amount (if different to usual payment) £ First payment date 2 5 M M Y Y Usual payment amount	Es per month Final payment amount (if different to usual payment) £ Final payment date (if applicable) How often do you want the payment made? Weekly 4 weekly Monthly Quarterly Half yearly Yearly Your payment reference (if applicable) Please give details of any special instructions
£ 5 - 00	If the funds are being sent to a non-Lloyds TSB account please allow up to three working days for funds to reach the recipient's acount.
Please note that we will not: make any reference to VAT or any other indeterminate element advise your address to the person/organisation you are paying tell the person/organisation you are not able to pay ask the bank of the person/organisation you are paying to tell this person/organisation when payments are received. I authorise you to debit my/our account, in accordance with the details in Section 2. This request is addressed to the bank which holds my/our account. PERSONAL CUSTOMERS — To check your account or amend a standing order call the Contact Centre on 0845 3 000 000	Your signature(s) Date Once you have completed this form, please return it to: Lloyds TSB, Box 1, BX1 1LT.
For bank use only From branch name Sort code	Contact telephone number and area dialling code ID confirmed
Contact name	For 30-00-02 accounts and all corporate (set 41) customers, send the completed form to City Office, Gillingham, Kent, TNT 23.

