



Standing Order Form

Please complete and return to:

An Cosantóir, Defence Forces Headquarters, Infirmery Road, Dublin 7.

First Name	Surname
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Address

Phone (h)	Phone (w)
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E mail:	Membership code:
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Annual Subscription

Please debit my bank account on the first working day of ____ (month) for €25.

Instructions to your Bank to Pay Standing Order to the benefit

An Cosantóir, Permanent TSB, 69/71 Phibsboro Road, Phibsboro, Dublin 7.

Account No: 80004475 Sort Code: 99-06-03

To: The Manager

Bank: _____

Address of your branch: _____

Name on Account: _____

Account No: _____ Sort Code: _____

I/we instruct you to pay by Standing Order from our account at the request of An Cosantóir. I/We will instruct the bank if there is any amendment or wish to cancel this instruction.

Signature(s): _____

Date: ____/____/20____

(For office use only)

Membership:

Date added:

Added by: