Standing Order Form - Sponsor Dr Sandra

When you have completed this form, please return it to: SIFT, 1 Harepath Road, Seaton, Devon, EX12 2RP



our details:	
Name:	
Address:	Postcode:
Email:	
Bank name:	
Bank address:	
	Postcode:
Sort code: Accou	unt number:
tanding Order details:	
_	Bank, The Square, Seaton, Devon, EX12 2QH
	ort code: 30-90-37 Account number: 01431595
Amount in words:	
On (date of first payment):	
Please continue to pay this amount:	Monthly Quarterly
Signed:	
	-
Signed:	Date:
Please notify SIFT if you want to cancel this declara pay sufficient tax on your income and/or capital gair	ation, if you change your name or home address, or if you no longer
taying in touch with SIFT	
Please tick the appropriate boxes to indica	ate how you would like to receive the following publicat
SIFT Insight and occasional brochures	s Email Post No thanks
Monthly SIFT Prayer and News sheet	Email Post No thanks
Information about projects that I sup (inc. Annual updates about Dr Sand	
Other occasional information by ema	
Please provide your phone number if you	

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