

**Standing Order Mandate**

To The Manager ( Full name and address of your bank or building society)

…………………………………………………………………………………

………………………… Postcode ……………….

Please pay Yorkshire Air Ambulance £…………………….. each month/year\*

starting on ……… until further notice.

YAA: Sort code: 30-90-57, Account number: 00244035, Ref

and debit:

Name (s) of Account Holder (s): …………………………………………

Account Number : …………………………………………

Bank Sort Code : …………………………………………..

Signatures (s) ……………………………… Date: ……………...

Name Mr/Mrs/Miss/Ms/Other\*

………………………………………………………………………………….

# Address: …………………………………………………………………………

……………………………………….. Postcode …………………

Telephone ………………………………………….

Email …………………………………………..

Please send this form to your bank. **\* Delete as appropriate**