



# Standing Order Form

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Post Code:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**To:** \_\_\_\_\_

**Bank Limited**

**At (address  
of branch)**  
\_\_\_\_\_  
\_\_\_\_\_

**Account No.**

**Sort Code**

You are hereby authorised to pay to the credit of

The Stauros Foundation at: **First Trust Bank**  
**English Street**  
**ARMAGH**  
**BT61 7LD**

Account Number: **04815066 (Sort Code No. 93-81-65)** the sum of:

£ \_\_\_\_\_ (in words \_\_\_\_\_)

Per week/month/year on the first day of \_\_\_\_\_ (month) and each subsequent  
week/month/year until further notice.

Signed \_\_\_\_\_

Please complete and return to: The Stauros Foundation  
Ballyards Castle  
123 Keady Road  
Armagh  
BT60 3AD

Telephone Number: 028 3752 7124