



STANDING ORDER FORM

Please print out this form, complete your details and return it to:

Lifesavers, The Royal Life Saving Society
River House
High Street
Broom
Warwickshire
B50 4HN

Please pay RLSS UK £2.00 each month or my preferred amount of £_____ each month until further notice.

Starting on* _____ (day)/ _____ (month)/ _____ (year) * please allow 1 month from today

Name(s) of account holder(s): _____

Bank Sort Code: Account Number:

To (name of your bank): _____

At (the branch address): _____

Postcode: _____

Signature(s): _____ Date: _____

GIFT AID DECLARATION

I want Lifesavers – RLSS UK to treat this and all-future donations I make from this date of declaration as Gift Aid donations. Please tick box

Signature: _____ Date: _____

Return this form to the FREEPOST address below:

RLSS UK
FREEPOST
License No: BM 4545
Broom
Alcester B50 4BR

Payable to: _____ Society bank details here

We do not share your details with other organisation and all details are treated as confidential for use within the charity only.
Registered Charity No. 1046060

Please accept our sincerest thanks for your gift.