

KING DAVID SCHOOLS

Financial Administration Dept. Eaton Road, Manchester M8 5DY
Telephone: 0161 740 3181. Fax: 0161 741 5081

**BANKER'S ORDER FORM: YAVNEH GIRLS SIXTH FORM
CONTRIBUTIONS**

Please return this form to the school immediately
Do NOT send it directly to your bank

To: The Manager _____ (Bank Name)

_____ (Address)

Please make the payment below and debit my/our account accordingly. This instruction cancels any previous order in favour of the King David School YAVNEH Account.

Credit: King David Schools YAVNEH Account (No. 65034309) at: -
The Co-operative Bank, P.O. Box 101, 1 Balloon Street, Manchester.
M60 4EP. Sort Code 08-90-00.

Amount: £ _____ in words _____

Quoting Parental Reference Number and Surname: A _____

Payments to be made on the 15th day of each month from 15/ /0 until 15/ /0 inclusive.

Debit: Account title _____
Account Number _____
Sort Code _____

Signed (1) _____
(2) _____

Dated: _____

Your name: _____

Address: _____

Post code _____ Tel: _____

Name(s) of child/ren

1. _____ School 2. _____ School
3. _____ School 4. _____ School