

**PLEASE RETURN TO**

# Medical Missionaries of Mary

Rosemount, Rosemount Terrace, Booterstown,  
Blackrock, Co. Dublin, Ireland • Tel: 353-1-2887180

**WE WILL SEND IT TO YOUR BANK**

## **STERLING** Standing Order Form

To Bank: \_\_\_\_\_

Address of Bank: \_\_\_\_\_

IBAN:

BIC:

Bank A/c Title: \_\_\_\_\_

### **BANK INSTRUCTIONS**

*Please debit my/our account in the amount of:*

**£10**

**£15**

**£20**

**£25**

or other amount £.....

*please choose a date between 6th and 28th of the month*

to commence on ..... and

payable each    month     thereafter on the  
                         quarter     due date until  
                         year         cancelled by me/us  
   in writing:

*and credit to the account of:*

**Medical Missionaries of Mary**

**Bank of Ireland, Trevor Hill, Newry, Co Down**

IBAN GB10BOFI90233812318032    BIC (Swift) BOFIGB2B

**Signed**..... **Date**.....  
*Authorised Account Signatory*

**Signed**..... **Date**.....  
*Authorised Account Signatory*

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

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

If you would like your gift to go towards the work of a particular Mission [or Sister],

Please Specify: .....

You may cancel your standing order at any time by contacting your bank. You may request that MMM remove your banking details from our records at any time. See contact details above.