|  |  |  |
| --- | --- | --- |
|  |  |  |

**Please fill in the whole form and send it to:**

|  |
| --- |
| Faculty of Pharmaceutical Medicine19 Angel Gate, 326a City RoadLondonUnited KingdomEC1V 2PT |

**Name(s) of account holder(s).**

|  |
| --- |
|  |
|  |

**Bank or Building Society account number**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |

**Branch sort code**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |

**Name and full postal address of your Bank or Building Society**

|  |  |
| --- | --- |
| To: The Manager | Bank/Building Society |
| Address |  |
|  |  |
|  |  |
|  | Postcode |

**Instruction to your**

**Bank or Building Society**

**to pay Direct Debits**

**Originator's Identification Number**

|  |
| --- |
|  |
| **809826** |

**Reference/FPM Membership Number**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |

**Instruction to your Bank or Building Society**

Please pay the Faculty of Pharmaceutical Medicine Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with the Faculty of Pharmaceutical Medicine and, if so, details will be passed electronically to my Bank/Building Society.

|  |  |
| --- | --- |
| Signature(s) |  |
|  |  |
|  |  |
|  |  |
| Date |  |

Banks and Building Societies may not accept Direct Debit Instructions for some types of account

|  |
| --- |
|  |

**This guarantee should be detached and retained by the payer.**

|  |  |  |
| --- | --- | --- |
|  | **The Direct Debit Guarantee** |  |
|  This Guarantee is offered by all Banks and Building Societies that take part in the Direct Debit Scheme. The efficiency and security of the Scheme is monitored and protected by your own Bank or Building Society. If the amounts to be paid or the payment dates change, the Faculty of Pharmaceutical Medicine will notify you 10 working days in advance of your account being debited or as otherwise agreed. If an error is made by the Faculty of Pharmaceutical Medicine or your Bank or Building Society, you are guaranteed a full and immediate refund from your branch of the amount paid. You can cancel a Direct Debit at any time by writing to your Bank or Building Society. Please also send a copy of your letter to us. |