Form to **Amend** a **Standing Order Instruction** making **regular payments** to **Marlow Opportunity Playgroup**.

Please complete in **BOLD CAPITALS**. Please mark option boxes with an 'X'

1. Your Account Details				
Account name				
Account holding branch				
Account number(8 digits, if less place zeros at the		Sort Code		- —
2. Details of existing Star	nding Order you	wish to amend		
Name of organisation you a	re paying: MARL0	OW OPPORTU	NITY PLAYGROU	JP
Payment Reference (if know	wn)			
Amount of each payment:	£			
How often are the payments made please put an 'X' in one box	Monthly	Quarterly	Half Yearly	Yearly
3. Details of amendment to take p	place immediately	or with ef	fect from	
New Amount: £	New payment of		MMM YYYY	
How often are the payments to be made if amending: please put an 'X' in c	Monthly one box	Quarterly	Half Yearly	Yearly
if amending: Please choose o	ne of the following	two options:		
either 1. Until further notice	(payment	s will be made ເ	until you cancel th	nis instruction)
or 2. Date of final payme	ent/	/	-	
4. Confirmation				
Your Signature(s)				
Date:// _				