



The World Zoroastrian Organisation

The World Zoroastrian Organisation

135 TENNISON ROAD, SOUTH NORWOOD, LONDON SE25 5NF

Website www.w-z-o.org

Charity No 1023334

Payment Form for Donations and Membership

<u>Your Personal Details</u>	<u>Your WZO Membership No. (If known)</u> / _____
<u>Name</u> _____	
<u>Address</u> _____	

<u>Post Code</u> _____	
<u>Email</u> _____	<u>Contact Tel No.</u> _____

Please tick either box A,B or C and complete the details for your chosen method of payment.

A	<p><u>Standing Order</u></p> <p>To The Branch Manager,</p> <p><u>Bank</u> _____</p> <p><u>Branch Address</u> _____</p> <p>_____</p> <p>_____</p> <p><u>Postcode</u> _____</p> <p><u>Please quote Reference</u> _____</p> <p>(This should be your Name or Membership No)</p>	<p>Please debit my/our Account</p> <p><u>ACCOUNT NAME:</u> _____</p> <p>Branch Sort Code <input type="text"/> - <input type="text"/> - <input type="text"/></p> <p>Account No. <input type="text"/></p> <p>The sum of £ _____ (in words) _____</p> <p>_____</p> <p>on _____ and thereafter on the 1st day of each following Month / Year (Please delete as appropriate) until further notice. This cancels any previous Standing Order to the same payee and for the same reference.</p> <p>To the Account of the World Zoroastrian Organisation SortCode: <u>60—50—01</u>, Account No: <u>13533479</u></p> <p>Signature _____ Date _____</p>
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B	<p><u>Credit / Debit Card</u></p> <p><u>Please indicate which Credit / Debit card you wish to use for payment</u></p> <p> <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> Maestro <input type="text"/> Issue No. </p> <p>Card No. <input type="text"/></p> <p>Valid from <input type="text"/> - <input type="text"/> Expiry date <input type="text"/> - <input type="text"/></p> <p>The Card Security Code (CSC) which are the last 3 digits on the back of your card <input type="text"/></p>	<p><u>I authorise the World Zoroastrian Organisation to debit my card for the sum of £.</u> _____</p> <p><u>Signature</u> _____</p> <p><u>Date</u> _____</p> <p><u>Please note these details will not be retained after your transaction has been completed.</u></p>
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C	<p><u>Cheque</u></p> <p>Please find enclosed my cheque payable to 'WZO' for £ _____</p>
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Please tick here if the donation qualifies for Gift Aid. If you have not previously completed a Gift Aid form for WZO, please email treasurer@w-z-o.org or contact us.

	<u>Gift Aid</u>
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