

Trainee Member banker's order

To: (name of member's bank)	
Address	
	Post code

Please pay to the account of the 'Doctors for the NHS'

the sum of thirty pounds (£30-00)

on the first day of

and annually thereafter until further notice from my account:

Your bank sort code

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Your account number:

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Name (Block capitals please)	
Address	
	Post code

Date

Signature

<i>For NHSCA use only:</i>
Name
Bank
Address
Sort code
Account number
DFNHS reference