## **Derbyshire Ornithological Society**



To:	Tho	Man	ager,
10.	IIIE	iviaii	agei,

Name of bank:		
Address of bank:		
Town/City:		
County:		
Post Code:		
Account details:	,	
Account name:		
Account No:		
Sort Code:		
Please pay now and annua date below to (to be comp  The Derbyshire Ornithologic National Westminster Bank	cal Society	r after the
Account No:		
Sort Code:		
Please quote reference on payment (to be completed by DOS):  This mandate replaces any Society	y previous mandates in favour of the Derbyshire Ornith	ological
Name		
Name:		
Signature:		
Date:		

## Please send the completed form to:

The Membership Secretary
Derbyshire Ornithological Society
20 Hillside
Findern Derby
DE65 6AZ