

SEPA Direct Debit Mandate

IE51ZZZ30456

Astronomy Ireland

*(The World's largest
astronomy club, per head of
population)*

By signing this mandate form, you authorise (A) **Astronomy Ireland** to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instruction from **Astronomy Ireland**.

As part of your rights, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank. A refund must be claimed within 8 weeks starting from the date on which your account was debited. Your rights are explained in a statement that you can obtain from your bank.

Please complete all the fields below marked *

*Your Name :

Your Address:

Address Line 1 _____

Address Line 2 _____

*City/postcode

* Country:

* Account number (IBAN)

*Swift BIC

*Creditors Name: **Astronomy Ireland**

*Creditors Address Line 1 **PO Box 2888**

*Address Line 2 **Dublin 5**

*Country **Ireland**

*Date of signing:

*Signature(s)

For office use only

Astronomy Ireland reference Number

Please return completed form to the address above (***Freepost***)

If you have any queries about completing this form please call 086-0646555 (Office Hours)