



Fibromyalgia Association UK
www.fmauk.org

FMA UK ONLINE PAYEE REQUEST

Please complete this form to enable us to set up a BACS payment to your account.

YOUR DETAILS

Name of Account Holder	<input type="text"/>
Company	<input type="text"/>
Position	<input type="text"/>
Telephone Number	<input type="text"/>
Email	<input type="text"/>
Address	<input type="text"/>

BANK DETAILS

Account number to be credited	<input type="text"/>
Bank Sort Code	<input type="text"/>
Name Of Bank	<input type="text"/>
Bank Address	<input type="text"/>

Signature

Account Holder signature?	<input type="text"/>
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I agree the details I have provided above are correct.

Once you have completed all details on this form, please fax it to **0844 826 9033** or scan and email it to head.office@fmauk.org. If you have any queries regarding this form then please contact Head Office on **0844 826 9022**.

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- Payments completed after 4pm or on weekends and public holidays will be processed the next business day.
 - Payments are made by BACS
 - Please allow 3 BUSINESS days from the payment date to the receipt of funds in your account
 - Business days do not include weekends and public holidays