Name and address of Parish Organiser:………………………………………………………

**PAYING-IN FORM**

**RIDE & STRIDE 10TH SEPTEMBER 2022**

……………………………………………………………………………………………………………………

Post Code: ………………………… Daytime Telephone Number: …………………………………….

E-mail Address: …………………………………………………………………………………….…………..

Name and address of church \* to receive proceeds: …………………...………………………………….

.....................................................................................................................................................................……………………………………………………………….. Post Code: ………………………………..

Church Bank Account Name: …………………………………………………………………………………

Sort Code:…………………………………………Number:…………….………………………………….

*\*Where more than one church is to benefit, please give details on reverse.* **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PAYMENTS**

Please note that payments will only be acknowledged en bloc, at about the end of November

**BANK TRANSFERS:** to CHCT account with CAF Bank Ltd. Sort Code: 40 52 40. Account Number: 00031903. Please reference R&S.

**CARD PAYMENT:** Make a Ride and Stride Payment on our website here [camhct.uk/r-s-payment](https://camhct.uk/ride-and-stride/ride-and-stride-payment/)

**CHEQUES:** Please make out cheques to ‘CHCT ‘

|  |  |  |
| --- | --- | --- |
| **Enclosed Cheques Issued By:**  | **Bank Code No.**  | **Amount**  |
|   |  **/ /**  | **£**  |
|   |  **/ /** | **£**  |
|   |  **/ /** | **£**  |
|   |  **/ /**  | **£**  |

**TOTAL REMITTANCE £……………………**

Please send this form and any cheques to:

Post: The Revd Tim Thompson, CHCT Ride Treasurer, 110 Columbine Rd, Ely CB6 3WN

Email: r-s-treasurer@camhct.uk Tel: 01353 772131