Debiting organization: Department: Organisation address:	
Date:	
Dear Sir/ Madam,	
Change of Card account details	
I/We have changed the card account in which my/our regular paym deducted. With immediate effect, please amend your records to ma future payments are deducted from my/our new card account.	
My/Our current card account details Financial institution: Account name: Card number: Expiry date:	
My/Our new card account details Financial institution: Account name: Card number: Expiry date:	
I/We confirm that I/We am/are authorised to operate the account re the card number and expiry date shown immediately above (My/Ou account details).	•
If you have any questions please contact me/us.	
Thank you for your assistance	
Yours sincerely	
Signature Signature	

Member name: Member number: Member address: