SEPA Direct Debit Mandate

Unique Mandate Reference

Unique Mandate Reference (UMR) For office Use Only.

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

This mandate may be used for both membership of the College, where applicable, and for payment of your annual professional competence registration. You can limit the scope of this mandate by ticking one of the choices below:

If you only wish to pay Professional Competence Registration by direct debit mandate please tick ☐

If you only wish to pay Annual Membership Subscription by direct debit mandate please tick ☐

Please complete all the fields marked *

Creditor's name	ICGP
Creditor identifier	IE75SDD99322 3
Creditor address	4-5 LINCOLN PLACE
City	DUBLIN 2
Post Code	DUBLIN 2
Country	IRELAND

Type of payment * Recurrent payment ☐ Or One-off payment ☐

Debtor Name *	
Debtor Address	
City	
Post Code	
Country	
Debtor account number – IBAN *	
Debtor bank identifier code – BIC *	
Date of signature *	

Signature(s)

Please sign here *

Please return this mandate to the Irish College of General Practitioners, 4-5 Lincoln Place, Dublin 2