

GIFT AID DECLARATION

Details of Donor:

Title: _____ Forename(s): _____ Surname: _____

Address: _____

Postcode: _____

Email: _____ Telephone: _____

I would like the charity to treat

* The enclosed gift of £ _____ as a Gift Aid donation; OR

* All gifts that I make today and in the future as Gift Aid donations; OR

* All gifts that I have made in the past 4 years and all future gifts of money that I make from the date of this declaration as Gift Aid donations. * *Delete as appropriate*

You must pay an amount of Income Tax and/or Capital Gains Tax for each tax year (6 April one year to 5 April the next) that is at least equal to the amount of tax that the charity will reclaim on your gifts for that tax year.

Signature _____ Date _____

Notes:

1. You can cancel this Declaration at any time by notifying the charity.
2. If in the future your circumstances change and you no longer pay tax on your income equal to the tax that the charity reclaims, you can cancel your Declaration.
3. If you pay tax at the higher rate you can claim further tax relief in your Self Assessment tax return.
4. If you are unsure whether your donations qualify for Gift Aid tax relief, ask the charity.
5. Please notify the charity if you change your name or address.

CHEQUES: Please make cheques payable to The Alasdair Gilchrist-Fisher Memorial Trust and send with this form to Catherine Gibbs, 75 Arlington Road, London NW1 7ES. **STANDING ORDER FORM:** Please return to Catherine Gibbs, 75 Arlington Road, London NW1 7ES for The Alasdair Gilchrist-Fisher Memorial Trust to process with your bank.

To The Manager:

Bank: _____

Address: _____

Please debit my account as follows:

Name of Account: _____

Account Number : _____

Sort Code: _____

Signed: _____

Date: _____

Please Pay To:

Bank: CAF Bank Ltd

Sort Code: 40-52-40

Account Name: Gilchrist-Fisher Memorial Trust

Account No: 00002588

£ _____ to start on: _____

and thereafter annually quarterly/monthly* until revoked

* *delete as appropriate*