



Boost your donation by 25p of Gift Aid for every £1 you donate

Gift Aid is reclaimed by the charity from the tax you pay for the current tax year. Your address is needed to identify you as a current UK taxpayer.

THE FRIENDS OF THE BALSAM CENTRE Charity Gift Aid Declaration – multiple donation

Name of Charity: WINCANTON COMMUNITY VENTURE
Charity Number 3898170

For regular donations please complete and attach the Regular Giving form (which comprises a Bankers' standing order form).

In order to Gift Aid your donation you must tick the box below:

I want to Gift Aid my donation of £ £ £ (delete as appropriate)

Or amount of my choice £ and any donations I make in the future.

Name of Charity Wincanton Community Venture

I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference.

Donor's details

Title _____ First name or initial(s) _____

Surname _____

Full Home address _____

Postcode _____ Date _____

Please notify the charity if you:

- want to cancel this declaration
- change your name or home address
- no longer pay sufficient tax on your income and/or capital gains

If you pay Income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your Self-Assessment tax return or ask HM Revenue and Customs to adjust your tax code.



Healthy Living Centre

FRIENDS OF THE BALSAM CENTRE
Name of Charity: WINCANTON COMMUNITY VENTURE
Charity Number 3898170

Giving by regular donation to support the Balsam Centre Charity (Wincanton Community Venture)

Regular Giving form
(Bankers Standing Order form)

Please complete the details below and return to
Sue Place, The Balsam Centre, Balsam Park, Wincanton, BA9 9HB marked 'Private and Personal'
Tel: 01963 31842 email: info@balsamcentre.org.uk web: www.balsamcentre.co.uk

PLEASE USE BLOCK CAPITALS

To: The Manager (your bank branch name and address)

[Text box for bank branch name and address]

[Text box for additional details]

Name of Account holder:

[Text box for account holder name]

My bank account no:

[Grid for bank account number]

Sort Code

[Grid for sort code]

Signature(s):

[Text box for signature]

Date:

[Text box for date]

Address:

[Text box for address]

[Text box for address]

[Text box for address]

Instruction to your bank or building society

Please pay to Wincanton Community Venture

CAF Bank Ltd. 25 Kings Hill Avenue, Kings Hill, West Malling, Kent, ME19 4JQ

Account Number:

[Grid for account number: 00014504]

Sort code

[Grid for sort code: 40]

[Grid for sort code: 52]

[Grid for sort code: 40]

The sum of £

[Text box for sum]

each month / quarter / year (delete as appropriate) until further notice

Starting on:

[Text box for starting date]