

Giving Regularly

Please complete this form in block capitals and return to:

AJRAF Goldleaf Appeal, ARC, Kate Greenaway Building, Fellows Court Weymouth Terrace, London E2 8LR

If you have any questions please call us on 020 7739 4730 or email fundraising@ajraf.org

Thank you

1) Your details

| , | |
|---|--|
| Your name | Mr/Mrs/Ms/Other |
| | First nameSurname |
| Your address | |
| | |
| email address | |
| Daytime phone number | |
| Use Gift Aid to make your donation worth more | |
| With your permission, we can claim the tax on your donation back from the Inland Revenue (28p in the pound). This won't cost you anything more. Just tick below! | |
| I am a UK taxpayer and would like AJRAF to benefit from Gift Aid repayment of tax on all donations I have made to AJRAF since 6 April 2000, until further notice (please tick) | |
| I am not a | a UK Taxpayer |
| To qualify for Gift Aid, what you pay in income or capital gains tax must at least equal the amount we will claim in the tax year. If your financial circumstances change in a way that will affect this, please let us know. | |
| Data Pro | otection |
| | Il store your details and may contact you in the future with information about our ase tick the box if you would prefer us not to. We will not pass your details on to a |



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2) Your bank details

Date

(We will pass this part of the form on to your bank) Name(s) of account holder(s) Account number Sort code Bank branch address **Instructions to Bank** Please pay the sum of: £_____ every / month / six months / year (delete as applicable) Starting on: (day/month/year) ____/___/ HSBC Bank plc for credit to: Albert Joyle Relief Agency Foundation. A/C No: 11691813 Sort code: 40 - 06 - 30 Your signature

Thank you for supporting AJRAF, your donation will help us to help thousands of vulnerable people each year