

Rossall Foundation Gift Form

PLEASE COMPLETE THIS FORM AND RETURN IT TO THE ADDRESS BELOW

TITLE: NAME: ADDRESS:
POSTCODE: EMAIL:
I WOULD LIKE TO SUPPORT (please tick) Unrestricted
I WOULD LIKE TO MAKE A REGULAR GIFT OF £ Monthly To start on (DATE) (MONTH) (YEAR) until further notice. Name(s) of Account Holder(s) Name of Bank/Building Society Address Account Number Sort Code Please pay The Rossall Foundation Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with The Rossall Foundation and, if so, details will be passed to my bank/building society. Signed Date
Please make cheques payable to The Rossall Foundation or enter your card details below: Visa /Debit
I AM A UK TAX PAYER 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. Signed Date To qualify for gift aid you must pay an amount in income tax or capital gains tax in the relevant tax year at least equal to the amount of tax that all the charities or CASCs that you donate to will re-claim on your gift (currently 25p per £1 donated). Please notify us if you change your name or home address, no longer pay sufficient tax on your income or wish to cancel this declaration.
I would like my gift to remain anonymous Please send me further information on leaving a gift in my will to the School THANK YOU VERY MUCH FOR YOUR GIFT