Wendover Dementia Support

Helping families through difficult times

Registered Charity no. 1182184

How you can help Wendover Dementia Support with a standing order or a one-off donation

**Your personal details**

Name: …………………………………………………….…..

Address: ……………………………………………….…….

………………………………………………………….………..

Postcode: ……………………………………………….…..

e-mail: ………………………………………….…………….

**REGULAR GIFTS BY STANDING ORDER**

**Your bank details**

Your bank name………………………………………….

Sort Code: : : .

Account Number:………………………………………...

Account Holder’s name: ………………………………

…………………………………………………………………….

**Account to be credited**

CAF Bank, sort code 40-52-40

Account No 00032499

Account name: Wendover Dementia Support

Reference: ………………………………………………..…

(your initial and name)

**Payment details**

Amount: £ .00

Date of first payment. …………………………………

Frequency – monthly

Date of Payment - 2nd of month

Print name……………………………………………………

Signature……………………………………………………..

**ONE-OFF GIFT**

A single donation may be made either by bank transfer to our account (see above, remembering to add your name as reference) or by cheque payable to **Wendover Dementia Support** sentto the address below. In either case, and if appropriate, please don’t forget to complete and return the gift aid declaration.

June 2021

**Charity Gift Aid Declaration**

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

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

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

I want to Gift Aid my donation of £……… and any donations I make in the future or have made in the past 4 years to Wendover Dementia Support.

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.

**My details**

Title ……. First Name or initial(s) ……………………… Surname…………………………………………………….………..

Full home address: ……………………………………………….…………………………..

………………………………………………………….………………..

Postcode: ……………………………………………….………….

Date …………………………………...

**Please notify Wendover Dementia Support if you:**

* want to cancel this declaration
* change your name, home address or e-mail
* 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 rate 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.