

**SACRED HEART**

**WBASS**

Office Use

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PARISH.....

**GIFT AID DECLARATION**

CLIFTON CATHOLIC DIOCESAN TRUSTEES REGISTERED (Registered Charity No: 233977)

I declare that I wish the Charity to treat all donations I have made for the four years prior to this year, and all donations I make hereafter as Gift Aid donations and reclaim the tax accordingly.

I confirm that I have paid or will pay an amount of Income Tax or Capital Gains tax for each tax year (6 April to 5 April) that is at least equal to the tax that all charities or Community Amateur Sports Clubs will claim on my donations for that year (25p for every £1 given on or after 6 April 2008) I understand that VAT and Council Tax do not qualify.

Signature ..... Date .....

Title ..... Forename .....  
(Mr, Mrs, etc)

Surname .....

Full Home Address .....

.....

Post code .....

Please indicate your chosen Method of Giving  
Please tick

Single donation by cheque	<input type="checkbox"/>
Weekly envelope	<input type="checkbox"/>
Standing Order	<input type="checkbox"/>

If by S/O please complete the attached Mandate

Please notify your parish if you change your name or home address.  
Want to cancel this declaration  
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.

Do not detach

Do not detach

**STANDING ORDER INSTRUCTION**

Please set up a Standing Order to pay

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£

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Amount in words

to **Diocese of Clifton Covenant Account**  
at **National Westminster Bank**

The Mall, Clifton, Bristol BS99 5AJ

Sort Code ..... Account No. ....

commencing 6<sup>th</sup> or .....(or 6<sup>th</sup> day of the next month if  
mandate received after the above date) and monthly thereafter  
until further notice.

Bank please use as reference.....

Office use only

**This is a NEW / AMENDED mandate** (Delete as appropriate)

All instructions regarding Standing Order .....to be cancelled.

Bank Name.....

Branch Address.....

.....

Bank Sort Code..... Account number .....

Title ..... Initials..... Surname.....

Address.....

.....

Signature..... Date.....

NB. If you are informing your Bank of this standing order by means of the INTERNET please obtain your GIFT AID Donation number from your parish Gift Aid secretary first as your Bank will need to be advised accordingly. Without this number your donations cannot be allocated to your chosen Parish.