

CHRIST'S HOSPITAL



GIFT AID DECLARATION

Please complete the form below if you would like to make a) a single gift or b) a series of gifts to Christ's Hospital.

For every £1 you give, we will be able to reclaim 28p through Gift Aid, as long as you have paid, or will pay, income tax and/or capital gains tax which is at least equal to the amount of tax that we reclaim on your donations in the tax year. **Please tick the box marked "Gift Aid" below.**

Full Name:

Address:

Postcode:

A. Single Gift

I enclose a single gift to Christ's Hospital of £

Gift Aid: please tick if you would like Christ's Hospital to reclaim tax on this donation.
(Please make cheques payable to "Christ's Hospital")

B. Series of Gifts

I would like to make a series of gifts to Christ's Hospital on the following terms:-

I wish to contribute for years the sum of £..... each month / quarter / year *(delete as appropriate)* starting on 27th (month) (year).

Gift Aid: please tick if you would like Christ's Hospital to reclaim tax on these donations.

I enclose a completed Direct Debit Form

Signature:

Date:

Please return to Partnership Office, Christ's Hospital, Horsham, West Sussex, RH13 0YP.
Registered Charity No. 306975