

YOUR DETAILS

PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS

TITLE:

FIRST NAME:

SURNAME:

EMAIL: _____

ADDRESS: _____

TOWN:

POSTCODE:

TELEPHONE:

MOBILE:

YOU CAN PROVIDE US WITH INSTRUCTIONS TO CONTACT YOUR BANK ON YOUR BEHALF

METHOD 1

I / WE WOULD LIKE TO DONATE: £ PER MONTH £ PER QUARTER £ PER YEAR



BANK NAME _____

BANK ADDRESS _____

ACCOUNT NAME(S) _____

SORT CODE - -

ACCOUNT NUMBER STARTING / /

GIFT AID

Yes, I would like you to claim Gift Aid on my donation.

I want all donations I've made to The Sussex Heart Charity in the past four years and all donations in future to be treated as Gift Aid donations until I notify you otherwise.

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. The Sussex Heart Charity will claim 25p on every £1 you donate.

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YOUR SIGNATURE _____

DATE / /

ACCOUNT TO BE CREDITED

The Sussex Heart Charity

SORT CODE - -

ACCOUNT NUMBER

YOU CAN DONATE TO US BY CHEQUE

METHOD 2

I / WE WOULD LIKE TO DONATE: £ BY CHEQUE AND ENCLOSE ONE TO THE AFOREMENTIONED AMOUNT MADE PAYABLE TO:

The Sussex Heart Charity Please don't send cash in the post.

ONE MORE THING...

In line with the General Data Protection Regulation (GDPR), please tick any combination of the following boxes to give The Sussex Heart Charity permission to periodically contact you to provide information as to how your donations help with our work. This will also allow us to send you event invitations. You can change your preferences or opt out at any time by contacting our office. We will NEVER pass your details to anyone else.

PHONE TEXT EMAIL POST

PLEASE RETURN YOUR COMPLETED FORM TO:

FREEPOST: THE SUSSEX HEART CHARITY (No need to write anything else but please write in capitals)

WWW.SUSSEXHEARTCHARITY.ORG

01273 523026