

# Charity Gift Aid Declaration - The Raleigh School Trust

## Charity Gift Aid Declaration The Raleigh School Trust Registered Charity No. 1179194

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

Gift Aid is reclaimed by the charity 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 the box below:**

- I want to Gift Aid my donation and any donations I make in the future or have made in the past 4 years to The Raleigh School Trust.
- 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 the charity if you:**

- want to cancel this declaration
- change your name or home address
- 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.

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Signature _____	Date _____
Child _____	Class _____

Pupil Name/s \_\_\_\_\_

I wish to contribute £\_\_\_\_\_ Per Month/Per Annum to The Raleigh School Trust and have completed the Gift aid and Payment Forms.

I wish to donate £\_\_\_\_\_ Per month/Per Annum to The Raleigh School Trust (Not Gift Aid) and have completed the payment forms.

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## Standing Order Mandate

PLEASE RETURN THIS STANDING ORDER MANDATE FORM TO YOUR  
BANK

To:	The Manager
Bank name: Bank address:	
Please pay:	Lloyds Bank plc PO Box 1000 BX1 1LT
For the credit of:	The Raleigh School Trust Account Number 17607368 Sort Code 30-98-90
The sum of (in numbers and words):	£
Commencing on the      day of                      in the year      and thereafter every month/year until further notice and debit my account accordingly: -	
Account name to be debited:	
Account number:	
Sort code:	

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

This Standing Order Mandate supersedes all previous standing orders to The Raleigh School Trust, Registered Charity Number 1179194