Set up a regular donation

Child





www.childofhopeuganda.org

This form can be used to set up a regular donation to Child of Hope by internet banking, standing order or PayPal/credit/debit card.

YOUR DONATION

Admin office, 1 Old Kiln Road, Upton, POOLE, BH16 5SG

Tel: 01202 697201 • email: enquiries@childofhopeuganda.org

1. YOUR DON	IATION		Tel: 01	202 697201 • email: enquiries@childofhopeuganda.	
How much is you	ır			Registered charity no. 1136068 (England and Wa	
monthly donation	n?	3 V∪I ID DI	ERSONAL DETAILS		
What date should be paid each mo		3. TOOK 11	ERSONAL DETAILS		
				Title:	
2. WHAT IS	YOUR DONATION F	OR? Address:			
Child educ	ation sponsorship			Post code:	
Teacher sp	oonsorship				
Family Support Team sponsorship		Tel no:			
Food		E-mail:	E-mail:		
Medicines/healthcare		Please tick if	Please tick if you are happy to receive news from Child of Hope,		
Operational funds		by e-ma	by e-mail (monthly) and/or by post (once or twice a year).		
орогашона			L		
4 CHARIT	V CIET AID DECLAI	DATION		giftaid it	
4. CHARITY GIFT AID DECLARATION 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 fo	or the current tax year.			
to identify you	as a current UK taxpay	er.		Want to cancel this declaration	
	Aid my donation of \pounds in the past 4 years.	and any donati	ions I make in the futur		
				 No longer pay sufficient tax on your income and/or capital gains. 	
	payer and understand the mount of Gift Aid claime			ins If you pay Income Tax at the higher	
	o pay any difference.	,	,	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	
Signature:			Date:	tax return or ask HM Revenue and	
inis must be a re	eal signature, not typed			Customs to adjust your tax code.	
5. HOW WII	LL YOU SET UP YOU	JR DONATION? Ple	ase tick one option:		
INTERNET	T BANKING: Please set	up your monthly donat	ion and post us this for	m, you don't need to complete section 6.	
STANDING	G ORDER: Please comp	lete section 6 below an	d post the form to the	above address.	
				IATE page of the Child of Hope website.	
Then com	nplete this form (not sec	ction 6) and post us the	e form.		
C DANK DET	TATLC (Compton diameter				
Bank name and	AILS (for standing o	**			
Darik Hame and					
				Postcode:	
Account name to	o be debited:				
Account no:			Sort code:		
The sum of:	t	In word	de		
The sum of.		III WOIC	15.		
Please pay:	HSBC	For the credit of:	Child of Hope		
Sort code:	40 - 15 - 27		91406094	Frequency : weekly/monthly/annually (circle one)	
				(circle one)	
Commencement	t date: /			(date of month)	
			until further notice fro	-	
Quoting the ref:		(your su	<i>rname)</i> and debit our	account accordingly.	
0					
Signature(s):			Date:		