

Set up a regular donation



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.

Admin office, 1 Old Kiln Road, Upton, POOLE, BH16 5SG
Tel: 07919 646324 • email: enquiries@childofhopeuganda.org
Registered charity no. 1136068 (England and Wales)

1. YOUR DONATION

How much is your monthly donation? £

What date should it be paid each month?

3. YOUR PERSONAL DETAILS

Name: _____ Title: _____

Address: _____

Post code: _____

Tel no: _____

E-mail: _____

2. WHAT IS YOUR DONATION FOR?

- Child education sponsorship
- Teacher sponsorship
- Family Support Team sponsorship
- Medicines/healthcare
- Operational funds

Please tick if you are happy to receive news from Child of Hope,
 by e-mail (monthly) and/or by post (once or twice a year).
By providing your details, you consent to Child of Hope holding your information and contact preferences on our secure systems. Our privacy policy can be found at www.childofhopeuganda.org

4. GIFT AID DECLARATION

Boost your donation by 25p of Gift Aid for every £1 you donate. Gift Aid is reclaimed by Child of Hope 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 of £ and any donations I make in the future or have made in the past 4 years to Child of Hope.

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.

Signature: Date:

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Please notify Child of Hope in the future 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.

5. HOW WILL YOU SET UP YOUR DONATION? Please tick one option:

- INTERNET BANKING: Please set up your monthly donation and post us this form, you don't need to complete section 6. Our bank: **HSBC** Sort code: **40 - 15 - 27** Account no: **91406094** Account name: **Child of Hope**
- STANDING ORDER: Please complete section 6 below and post the form to the above address.
- CREDIT/DEBIT CARD OR PAYPAL: Please set up a regular donation on the DONATE page of the Child of Hope website.

6. BANK DETAILS (for standing order only)

Your bank name and address: _____
Postcode: _____

Account name to be debited: _____

The sum of: £ _____ Account no: _____ Sort code: _____ - _____ - _____

Please pay: **HSBC** Sort code: **40 - 15 - 27** Account no: **91406094** For the credit of: **Child of Hope**

Commencement date: ____ / ____ / ____

Frequency: weekly/monthly/annually (circle one) and thereafter every _____ (date of month) until further notice.

Quoting the ref: _____ (your surname) and debit our account accordingly.

Signature(s): _____ Date: _____

This must be a real signature, not typed