



**DONATION DETAILS.** (please return with your direct debit form)

**Donation Amount:** (please tick) £5  £10  £15  £20  £25  £30  Your Choice \_\_\_\_\_

**Frequency:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Postcode:** \_\_\_\_\_

**GIFT AID DECLARATION**

If you pay tax we can reclaim the tax you have already paid on your gift. Please tick the box. Thank you.  
I would like UCF to gift aid all of my donations – increasing my donations by 28p in every £1.

Please tick

(You must pay tax equal to what we will claim – 20%. Please notify us if your circumstances change.  
You can cancel this at any time).

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

