



# Donation Form

Full Name in Capitals \_\_\_\_\_

Address in Capitals \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Telephone Number \_\_\_\_\_

E-mail Address \_\_\_\_\_

## Gift Aid Declaration

I, \_\_\_\_\_

Hereby declare that I wish all donations I have made since 6th April 2000, and all donations I make hereafter until I notify you otherwise, to The Toby Henderson Trust to be treated as Gift Aid donations. I also declare that I do pay income tax or capital gains tax equal to the amount of tax deducted from my donations.

Signature \_\_\_\_\_

Date \_\_\_\_\_

## Method of payment

I enclose a cheque for £ \_\_\_\_\_ made payable to **“The Toby Henderson Trust”**

I wish to donate by standing order and have completed and enclosed the Banker's Order form.

I wish to donate by credit card:-

Donation amount £ \_\_\_\_\_ Date \_\_\_\_\_

Name as it appears on the card \_\_\_\_\_

Mastercard / Switch / Visa ( Please delete as appropriate ).

Card number \_\_\_\_\_

Expiry date \_\_\_\_\_

Signature \_\_\_\_\_

# Bank Standing Order Mandate

To **The Toby Henderson Trust** Inland Revenue Number X9999

Name and full address of your bank \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Your Account details

Sort code \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Account number \_\_\_\_\_

Account name \_\_\_\_\_

Please make the payment below, debiting my/our account shown, until the last payment has been made, or earlier notice.

Please pay to: **Barclays Bank PLC, 38 Bridge Street, Morpeth, Northumberland, NE61 1NL**

Sort code **20- 58-17** for the credit of **The Toby Henderson Trust** Account number **60098256**

On the \_\_\_\_\_ [day] of \_\_\_\_\_ [month], \_\_\_\_\_ [year],

The sum of £ \_\_\_\_\_ (in words) \_\_\_\_\_

and the SAME SUM (Choose one option below. Please delete and initial the other two that do not apply)

on the same day annually until \_\_\_\_\_ payments in all have been made.

(For annual payments, insert number of years)

on the \_\_\_\_\_ day of every three months for \_\_\_\_\_ years making  
\_\_\_\_\_ payments in all. (For quarterly payments. Total payments = number of years x 4)

on the \_\_\_\_\_ day of every month for \_\_\_\_\_ years making \_\_\_\_\_ payments in all.

(For monthly payments. Total payments = number of years x 12)

Signed \_\_\_\_\_

Date \_\_\_\_\_

Name (Printed) \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

When you have completed and signed this form, please mail it to

**The Toby Henderson Trust**  
The Old Barn  
Whitehouse Farm Centre  
Stannington  
Northumberland  
United Kingdom NE61 6AW