

Name(s)	
Address:	
Postcode:	Telephone
Email [.]	

Please notify the charity if you change your name or home address.

GIVING FOR 2024/25

My/our planned giving to Holy Trinity for 2024/25 will be

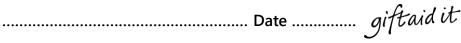
Thank you but I/we do not wish to declare my/our giving (tick here):



Please treat all donations I have made for this year and for the four years prior to the year of this declaration, and all donations I make from the date of this declaration, until I notify you otherwise, as Gift Aid donations to the above charity.

You must pay an amount of Income Tax and/or Capital Gains tax for this tax year, at least equal to the tax that the charity will claim from HMRC on your Gift Aid donation. I 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.

Please SIGN HERE to authorize the reclaiming of tax by Gift Aid:



Holy Trinity Jesmond will reclaim **25p** on every **£1** you give. If you pay income tax at the higher rate, you must include all your Gift Aid donations on your Self-Assessment Return if you want to receive the additional allowance.

Please return this **SIGNED** form to church or to the Treasurer. THANK YOU. All information is treated in the strictest confidence.



To THE MANAGER

Bank Name	
Bank Address	5:

Date:

Please pay to:

The Cooperative Bank, PO Box 250, Skelmersdale, WN8 6WT (Sort Code 08 92 99) For the credit of **HOLY TRINITY PCC**, Account Number: **65202089**

The sum of

On the day of 2024

And a like amount on the same day each month / quarter / half-year / year (delete as appropriate)

Please debit my account number:

This order cancels any previous order made by me/us to Holy Trinity Church.

Name(s)	
Address:	
Signature	