

GIFT AID DECLARATION FORM

Name (Please print your name here):

Address:

.....

Post Code: Date:

Telephone: Signature:

Please treat all the donations I have made since 6th April 2000, and all donations I make hereafter to *Emmanuel Church with St. Mary in the Castle, Hastings* as Gift Aid donations. I will inform the church Treasurer/Gift Aid Officer if:

...I find that I pay less Income/Capital Gains tax than Emmanuel can claim from my donations (25p for every pound given) or

...I change my address

Please return this form to:

Carol Eldridge
Emmanuel Church Treasurer
C/O Mendham Hall
Vicarage Road
Hastings.
TN34 3LZ **...By post or via the box at the back of church**

THANK YOU

FOR OFFICE USE ONLY:

Confidential Identification Number: