

Charity Gift Aid Declaration: single donation



Boost your donation by 25p of Gift Aid for every £1 you donate.

Gift Aid is reclaimed by the Society from the tax you pay for the current tax year.

In order to Gift Aid your donation you must tick the box below:

I want to Gift Aid my donation of £..... to the Combe Mill Society

I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax in the current tax year than the amount of Gift Aid claimed on all my donations it is my responsibility to pay any difference.

My Details (please use capitals)

Your address is needed to identify you as a current UK taxpayer and your Annual Pass will be posted to the same address.

Title..... First name or initials..... Surname.....

Full Home Address.....

.....

.....

Postcode..... Date.....

Keeping in Touch

We like to send the occasional email to keep Annual Pass holders informed of what events are coming up at the Mill. If you wish to receive these emails please enter your email address below.

Email address.....

Please be aware that:

- If you wish to cancel this declaration, you must notify the Society within 30 days of your visit.
- You may change your name or home and/or e mail addresses at any time
- You must pay enough Income or Capital Gains tax in the current tax year to cover the total amount that you have agreed can be reclaimed by all charities or Community Amateur Sports Clubs
- Other taxes such as VAT and Council tax do not qualify
- 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.

In accordance with the General Data Protection Regulation (GDPR) we need your permission, for the purpose of administering the society, to keep the information that you supply electronically in our membership database.

By signing this form you declare that your permission is granted.

If at any time you wish to withdraw your permission, please contact the Secretary.

Signature: _____

Date: _____

(Office Use Only)

Annual Pass number		<i>Required if the Pass HAS been issued from the Ticketing system</i>
Date of visit		<i>Only required if a ticket has NOT been issued from the ticketing system</i>
Payment Number		
Adults		
Concessions		
Young persons		

Thank you for Gift Aiding