



THE UNIVERSITY OF THE THIRD AGE

TORRIDGE THIRD AGE GROUP
www.torridgeu3a.btck.co.uk

GIFT AID FORM

LR.TAX REF.XR63824

DETAILS OF DONOR / S

1st Applicant

2nd Applicant

Name:

Name:

Address:

Address:

.....

.....

Post Code:

Post Code:

I / we want the charity to treat all donations I make, from the date of this Declaration until I / we notify you otherwise, as Gift Aid donations.

Signed:

Signed:

Date:

Date:

Please detach along this line

Notes

Notes

- 1. You must pay an amount of income tax and/or Capital Gains Tax at least equal to the tax that the charity reclaims on your donations in the tax year.
2. You can cancel this Declaration at any time by notifying the charity.
3. If, in the future, your circumstances change and you no longer pay tax on your income and Capital Gains equal to the tax that the charity reclaims, you can cancel your Declaration.
4. If you pay tax at the higher rate, you can claim further tax relief in your Self Assessment Tax Return.
5. If you are unsure whether your donations qualify for Gift Aid tax relief, ask the charity, or ask your local Tax Office for Leaflet No. IR65.
6. Please notify the charity if you change your address.

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