



I would like to make a.....

regular donation

....to Alabaré Christian Care Centres

Thank you so much for making a regular donation to Alabaré. Please print out this form, complete and return to **Alabaré Christian Care Centres, FREEPOST (SCE 9703), SALISBURY, SP1 2YZ.**

(If you are unable to print this form for any reason, please contact us on 01722 322882 and we will happily post one to you).

| Personal Details | | |
|------------------|---------|----------|
| Title | Initial | Surname |
| Address | | |
| | | |
| | | Postcode |
| Tel No | Email | |

| Regular donation by Standing Order | | |
|---|--------------------------|---|
| To the Manager (Bank/Building Society Name) | | |
| Bank/Building Society Address | | |
| | | Postcode |
| Name of Account Holder(s) | | |
| Account Number | <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Sort Code | <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Please pay the Royal Bank of Scotland (16-31-12), Salisbury Branch, 14 Minster Street, Salisbury SP1 1TP, to the credit of Alabaré Christian Care Centres (a/c 11119999), the sum of: | | |
| £(figures) | (words) | |
| Starting on (day) | (month) | (year) |
| And the same amount on the same day each month/quarter/year* until further notice (*delete as appropriate) | | |
| Signed | Date | |
| Please return your completed Bank Standing Order Form to Alabaré at the above address. DO NOT SEND TO YOUR BANK. | | |

From time to time Alabaré Christian Care Centres, or other carefully selected organisations or charities, may contact you with news of events and special offers. If you would prefer not to be included, please tick the relevant box(es)

Alabaré Christian Care Centres

Other carefully selected organisations/charities

| | |
|---|---|
| <i>giftaid it</i> | Please treat all donations I have made to Alabaré Christian Care Centres in the six years prior to this year, (but no earlier than 06/04/2000) and all donations I make from the date of this declaration until I notify you otherwise, as Gift Aid donations. To qualify for Gift Aid, what you pay in income or capital gains tax must equal the amount we claim in the tax year (currently 25p for each £1 you give). |
| Signed | Date |
| <ul style="list-style-type: none"> You can cancel this declaration at any time by notifying Alabaré Christian Care Centres in writing Remember to notify us if you no longer pay an amount of income and/or capital gains tax equal to the tax we reclaim Please notify us if you change your name or address If you pay tax at the higher rate you can claim higher rate tax relief on your Self Assessment tax return For more information on Gift Aid tax relief, please call 0845 602 0203 | |