## **Gift Aid Declaration Form**



Please complete our Gift Aid declaration, filling in any blank spaces below, and return it to: Fundraising Department, Jewish Care, Amélie House, Maurice and Vivienne Wohl Campus, 221 Golders Green Road, London NW11 9DQ

| Title:                | First name:  |                      | Surname:  |
|-----------------------|--|----------------------|---|
| Home address:         |  |                      |   |
|                       |  |                      |   |
|                       |  |                      | ostcode:  |
|                       |  |                      |   |
|                       | bles us to provide vital services to ou<br>v you can help us through financial su  | •                    | I send you information by post to tell you abou<br>t in events or by volunteering.            |
| Please tick here if   | you are happy to receive this informa  | ion by: 🗌 Email      | Phone Text message  |
| us or no longer v     | The state of the s | us, you can let us k | ou would like to change the way you hear from<br>now by contacting our Supporter Care Team or |
|                       | about your rights and how we process<br>r Care Team for a copy of our privacy s  |                      | nation visit <b>jewishcare.org/privacy-statement</b> o  |
| Boost your do         | nation by 25p of Gift Aid for every  | 1 you donate!        |   |
| In order to Gif       | t Aid your donation(s) you must tic  | the box(es) belov    | V   |
| ☐ YES, I              |  | (PLEASE PRINT N      | AME) would like <b>Jewish Care</b> to treat:  |
| □ all my              | donations in the past 4 years and in   | he future □ th       | nis donation only   |
|                       | ns Tax than the amount of Gift Aid o   |                      | erstand that if I pay less Income Tax and/or nations in that tax year it is my responsibility |
|                       | fy Jewish Care if you want to cancel t<br>nt tax on your income and/or capita  |                      | nge your name or home address or no longer  |
| ☐ <b>No</b> , I am no | t a UK Tax Payer   |                      |   |
|                       |  |                      |   |
|                       |  |                      |   |
| Signature:            |  |                      |   |
| Date of Doclarat      | ion:   |                      |   |

