

# Monthly Donation Form

Please complete this form and return to:

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£10 ☐ £5 ☐ £3 ☐ or my own amount of £  (£2 Min) on the 1st ☐ or 15th ☐ of each month.

My Details (please fill in your details below)

Title  Name

Address

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Postcode

Email\*

Phone  Mobile\*

\*if you are happy for The Great Western Air Ambulance Charity to contact you by email or SMS please write your preferred email address and/or mobile number in the spaces provided above. You can unsubscribe at any time.

If you are a UK taxpayer we can claim back the tax on your donations

– that's 25p extra on every £1 you give. On a £25 donation that would be an extra £6.25!

*giftaid it*

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☐ I am a UK Taxpayer\* and would like The Great Western Air Ambulance Charity to treat all donations that I have made in the past 4 years and all donations that I make from the date of this declaration as Gift Aid donations.

\*NB. You must pay an amount of income tax and/or capital gains tax in each year (6th April to 5th April) at least equal to the tax that all the charities or Community Amateur Sports Clubs that you donate to will reclaim on your donations for that tax year (25p on every £1 you give). Please notify us if you no longer pay sufficient tax, want to cancel this declaration, or change your name or home address. If you pay a higher tax rate, you can claim further tax relief in your Self Assessment tax return.

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The Great Western Air Ambulance Charity occasionally sends its supporters information about other sympathetic organisations. If you do not want to receive their mailings, please tick this box (tick box) the information provided will be held by The Great Western Air Ambulance Charity. We need to hold this data to process your gift. We would like to keep you informed about The Great Western Air Ambulance Charity's campaigns, events and other activities that may be of interest to you. If at any time you prefer not to receive this please contact the Head Office on 01179699344 or info@gwaac.com Registered as a charity no. 1121300

## Instruction to your Bank or Building Society to pay by Direct Debit



Name/s of Account Holder/s  Service user number

Bank/Building Society a/c no.  Sort code  Reference (official use only)

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Name and full postal address of your Bank or building Society branch  
To the Manager: Bank/Building Society name

Address

Postcode

Instruction to your Bank or Building Society: Please pay Eazy Collect re Air Ambulance Direct Debits from the account detailed in this instruction, subject to the safeguards assured by The Direct Debit Guarantee. I understand that this instruction may remain with Eazy Collect re Air Ambulance and, if so, details will be passed electronically to my Bank/Building Society.

Signature/s

Today's date

Banks and Building Societies may not accept Direct Debit instructions on some types of account.

This guarantee should be detached and retained by the payer



### The Direct Debit Guarantee

- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.
- If there are any changes to the amount, date or frequency of your Direct Debit by Eazy Collect re Air Ambulance will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request Eazy Collect re Air Ambulance to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit, by Eazy Collect re Air Ambulance or your bank or building society you are entitled to a full and immediate refund of the amount paid from your bank or building society.
- If you receive a refund you are not entitled to, you must pay it back when Eazy Collect re Air Ambulance asks you to.
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.