

MAKING A REGULAR GIFT TO THE ADVOCACY PARTNERSHIP

Please print out this form, complete it and send it to:
Advocacy Partnership, 273 Rugby Road, Leamington Spa, CV32 6EB, UK.

PLEASE PRINT

Donor Details

Name (in full): _____

Address: _____

Town: _____ Post Code: _____

Telephone Home: _____ Email: _____

I wish to give a monthly / annual donation of £ _____.

Starting on: ___/___/____ (to help with administration please give mid month.)

The Advocacy Partnership would like to contact you with details of our work and progress. If you do not wish to receive contact from us then please tick this box.

Standing Order Mandate The Advocacy Partnership will process this so please do not send it to your bank.

Instructions to your Bank/Building Society to pay Standing Orders

To: The Manager: _____

Name and branch of Bank / Building Society

Address: _____ Post code: _____

Please debit my Account No: _____ Sort Code: _____

Please pay the Advocacy Partnership £ _____ per month / year until further notice.
(Please delete as appropriate)

Signature: _____ Date: _____

Note to Bank: Please pay the Advocacy Partnership at the Co-operative Bank

Sort Code: 089299. A/C No: 65283655

Gift Aid Declaration

Title: _____ Forename: _____ Surname: _____

If you pay UK tax, the Advocacy Partnership can claim back tax you have already paid on this donation. This will increase the value of the donation by up to 28% at not additional cost to you.

YES I would like the Advocacy Partnership to treat this and all future donations I make as Gift Aid donations, including any donations made since 6 April 2000. I confirm I am a UK tax payer and the amount of tax I pay exceeds the amount I would like the Advocacy Partnership to claim.

Signature: _____ Date: ___/___/____

The Advocacy Partnership is a UK registered Charity number 1123877.

Thank you for your valuable contribution.

Advocacy Partnership, 273 Rugby Road, Leamington Spa, CV32 6EB, UK. Web: www.advocacypartnership.org