Gift Aid Declaration Form

(…for donations to an Elim EFGA church)

**YOUR DETAILS**

MR / MRS / MS \_\_\_\_\_ FIRST NAMES**\***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SURNAME**\***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**HOME** Address**\*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ POSTCODE**\*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** PHONE **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\*Required information – these fields must be completed**

**Privacy Statement**

Elim is committed to ensuring that your privacy is protected and that data collected will only be used for our legitimate interest, including the Gift Aid process, in accordance with our privacy policy. See this in full at **www.elim.org.uk/privacypolicy** or contact our Data Protection Officer by email to **dpo@elimhq.net** or write to the **Data Protection Officer, Elim International Centre, De Walden Road, MALVERN WR14 4DF**. All personal data collected by Elim within this form will only be kept for as long as necessary.



**Gift Aid is only applicable if you’re a UK tax payer**

**After reading the following statement, tick (**☑**) to choose ONE declaration option -**

***I am a UK tax payer and understand that if I pay less Income Tax and/or Capital Gains Tax for each tax year (6 April to 5 April) than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference. I understand the charity will reclaim 25p of tax on every £1 that I give.***

* ***Enduring Declaration – I wish Elim to treat as Gift Aid, all my donations from the start of the current tax year (6 April), or all donations from DD / MM / YYYY and thereafter.***

**OR**

* ***Single Amount Declaration – I wish Elim to treat as Gift Aid,***

***only the amount of £\_\_\_\_\_\_\_\_\_\_\_\_ given on DD / MM / YYYY****.*

**(Selecting this limitation would require a fresh declaration for any future donations)**

***Signature*** ***Date DD / MM / YYYY***

**BENEFITTING CHURCH/DEPT: (office use)**

**Elim Church Code:** CB007 **Name of Church/Department** Riverside Elim

**Local reference: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Elim Finance Dept. GAD reference \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Elim Foursquare Gospel Alliance, Registered Charity 251549 (England and Wales) SC037754 (Scotland)**

**ELIM INTERNATIONAL CENTRE, DE WALDEN ROAD, MALVERN WR14 4DF**

**How does Gift Aid work?**

Using Gift Aid means that for every pound you give, we get an extra 25 pence from the Inland Revenue, helping your donation go further.

So, £100 can be turned into £125 just so long as donations are made through Gift Aid.

## The benefits of Gift Aid

* ***No extra cost to you***Yet your giving increases significantly.
* ***No need for separate forms***By signing the **standard, “enduring” declaration** for multiple donations you can avoid the need to complete a new form each time you give, but you have the option to restrict to a Single donation if you need to.

**What if my circumstances change?**

If you cease paying UK income tax or capital gains tax let us know and we will cancel your declaration from the date of receipt of your instructions. Please also notify us in the event of a change of name or address.

**Methods of payment**

* **Cash/Cheque payments:** We must be able to prove to the Revenue the receipt of the donations from each individual donor. To do this we make use of a confidential numbered envelope system which is uniquely referenced to you.- *Please ask your Finance Officer for a numbered set*
* **Standing order:** If you give a regular amount why not set up a standing order? This should quote the unique reference issued to you. - *Please complete your own bank details, sign and return this to your Finance Officer who will complete the Church/Dept. bank details and reference before sending this to your bank.*

**Standing Order form**

|  |  |
| --- | --- |
| *(Please enter name and address of your bank)* | **Please pay to:** |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Bank plc** | A/C Name: EFGA RE BEWDLEY RIVERSIDE |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | A/C Number: 18535038 |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sort Code: 60-05-16 |
| **Pay on** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (DD/MM/YYYY) **and monthly thereafter, the amount of £** |
| **until further notice, quoting ref: GIFTAID/ Payment will continue until you cancel this instruction)** |
| **Account name:** | **Signature(s)** |
| **Bank Account Number** |  | **Sort Code** |
|  |  |  |  |  |  |  |  |  |  | - |  |  | - |  |  |