

Standing Order Form

To the Manager of: (Please give the name and address of your bank)
Postcode:
Please pay Network Counselling & Training Ltd (Account No: 61440713 Sort Code: 40-14-24)
the sum of £ (figures) (words) from (date) and continuing thereafter
Monthly / Quarterly / Annually (delete as appropriate) until I give you notice.
Account Holder Name: Sort Code:
Signature: Date:

Gift Aid Declaration

Name of charity: Network Counselling & Training

Please treat

The enclosed gift of £ as a Gift Aid donation; **OR**

All gifts of money that I make today and in the future as Gift Aid donations. (*Please tick the appropriate box*)

You must pay an amount of Income Tax and/or Capital Gains Tax for each tax year (6 April one year to 5 April the next) that is at least equal to the amount of tax that the charity will reclaim on your gifts for that tax year.

Donor's details

TitleInitial(s) ... Surname

...... Postcode Date:

Please notify Network if you want to cancel this declaration, change your name or home address or no longer pay sufficient tax and/or capital gains.

Network will reclaim standard rate tax on every £1 you give. If you pay Income Tax at the higher rate, you must include all Gift Aid donations on your tax return if you want to receive the additional tax relief due to you.

Please return to:

Network Counselling & Training Limited, Elm Park, Filton, Bristol BS34 7PS Reg. Charity No 272901 Company Ltd. by Guarantee No 1951370

Date received:

Contact: