GIVING FORM

St Thomas' & St Mary Magdalene's

Gift Aid Declaration

Full Name			
Address			
Post Code			

I confirm I have paid or will pay an amount of income tax and/or capital gains tax for each tax year (6th April-5th April) that is at least equal to the amount of the tax that all the charities (including churches) and Community Amateur Sports Clubs that I donate to will reclaim on my gifts for that tax year. I understand that other taxes such as VAT and Council Tax do not qualify. I understand that the church will reclaim 25 pence of tax on every £1 that I give.

Signature _____

Date

I will notify the church if: a) I wish to cancel this declaration; b) I change my name or home address; or c) I no longer pay sufficient tax on my income/capital gains.

NB Higher rate taxpayers can claim back the difference between basic rate (currently 25%) and higher rate tax on all donations they make to charities by lodging a claim and providing supporting documentation to the Revenue and Customs.

notified of any changes to our schedule, to provide you with other information from tim telephone numbers will be kept by The Par boxes and sign as indicated that you agree	advertise events and fundraising activitie e to time. For these purposes a secure of ochial Church Council of St Thomas' and /do not agree to us doing this: of the above Churches keeping my conta	hes would like to stay in contact with you in order to keep yo s at St Thomas' and St Mary Magdalene's Churches and to latabase of names, postal addresses, email addresses and St Mary Magdalene's Churches. Please tick the appropriat act details in order to contact me for the above purposes	D
I do not consent to The Parochial Ch purposes.	urch Council of the above churches keepi	ing my contact details or contacting me for any of the above	3
Signed	Name	Date	
Signed	Name	Date	
	d St Mary Magdalene's Churches. St Tho	stating so in writing addressed to: mas Church, London Rd, Stockton Heath, Warrington WA4 www.stthomas-stocktonheath.org.uk/your-data-gdpr/	6HJ
The information maintained on our database consent of the individuals to whom it relates u		hared with any other individual or organisation without the enarm to members of the public.	explicit

Please complete this form and return to the Giving Secretary: stsmmgiftaid@outlook.com