GIFT AID FORM

By filling in this form Cobham Area Foodbank will receive an extra 25p for every £1 you give at no extra cost to you. Thank you!



| Mr/Mrs/Miss | |
|---|--|
| Name: | |
| Address: | |
| | |
| Post Code: | Phone: |
| Email: | |
| giftaid it | Boost your donation by 25p of Gift Aid for every £1 you donate. I want to Gift Aid my donation and any donations I make in the future or have made in the past four years. I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference. Date: |
| | touch with you so we can update you on our work. uld be happy to receive communications from us: I do not wish to receive future communications from Cobham Area Foodbank |
| You can change your premanager@cobhamarea. Data protection | eferences any time by contacting us on 01932 450282 or emailing us at foodbank.org.uk |
| Cobham Area Foodbank is con Protection (GDPR) legislation. relating to our work. To unsul | mmitted to protecting your privacy and will process your personal data in accordance with current Data Cobham Area Foodbank collects information to keep in touch with you and supply you with information bscribe from our newsletter, send a message to the email address above with the word unsubscribe in the y statement for financial donors is available from the foodbank on request. |
| We would love to know why y below: | ou have chosen to donate to Cobham Area Foodbank. If you would like to share your motivation let us know |
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