



GIFT AID DECLARATION

DETAILS OF DONOR:

TITLE.....FORENAME(S).....

SURNAME.....

ADDRESS.....

.....

.....POST CODE.....

TELEPHONE NO.....E-MAIL.....

I WANT YOU TO TREAT AS GIFT AID, ALL DONATIONS I MAKE FROM THE DATE OF THIS DECLARATION UNTIL I NOTIFY YOU OTHERWISE

SIGNATURE.....

DATE...../...../.....

NOTES:

1. If your declaration covers donations you make in the future:
 - (a) please notify the Charity if you change your name and address while the declaration is still in force.
 - (b) you can cancel the declaration at any time by notifying the Charity – it will then not apply to donations you make on or after the date of cancellation or such later date as you specify.
2. You must pay an amount of income tax and /or capital gains tax at least equal to the tax that the Charity reclaims on your donations in the tax year.
3. If in the future your circumstances change and you no longer pay tax on your income and capital gains equal to the tax that the Charity reclaims, you can cancel your declaration (see note 1)
4. If you pay tax at higher rate you can claim further tax relief in your Self Assessment tax return.

PLEASE RETURN THIS FORM TO: THE BRAINWAVE CENTRE
FREEPOST (BS 5057)
BRIDGWATER
SOMERSET TA6 6BR