DONATION FORM
For BAAS Educational Trust

The Esther Benjamins Trust

Charity Name: The Esther Benjamins Trust

Charity Ref: 8949-10

Title……..Forename(s).....Surname.....

Address……..

…….....

Postcode…… Telephone ……

e-mail address ……

Please complete payment method A or B

(A) I WISH TO MAKE A SINGLE DONATION

BY CHEQUE and enclose a cheque for the sum of £……..

Please make cheques payable to 'The Esther Benjamins Trust' clearly earmarked for BAAS

BY CREDIT / DEBIT CARD
I authorise you to debit my account with the amount £……..

Card type MASTERCARD / VISA / DELTA / SWITCH / MAESTRO

Cardholder's name ……

Card number | | | | | | | | | | | | | | | | | |

Start date…… Expiry date…….…. Switch card issue no…..……

Security code…… Signature……

(B) I WISH TO MAKE A REGULAR DONATION OF £ ……..……

monthly / quarterly / half yearly / annually Commencing: (dd)…… (mm)…… 200……
(please allow 4 working weeks from date of signature)

Please complete mandate opposite

Credit card donations can also be made over the phone – please contact us on 020 7600 5654

Instruction to your Bank or Building Society to pay Direct Debit.

DIRECT Debit

Please send this completed Instruction to:

The Esther Benjamins Trust
Third Floor
2 Cloth Court
London
EC1A 7LS

Originator's Identification Number

6	8	5	3	0	3

CAF Ref No: 8949-10

CAF, KINGS HILL, WEST MALLING, KENT, ME19 4TA

FOR CAF OFFICIAL USE ONLY – This is not part of the instruction to your Bank/Building Society
Date of first payment on or after:
| | | - | | | - | | | | |

Name(s) and address of account holder(s)

Dr/Mr/Mrs/Miss/Ms ……

Address……

……

……Postcode……

Bank/Building Society account number

Branch Sort Code

		-			-		

Name and full postal address of your Bank/Building Society

To: The Manager

Address……..

……..……

……Postcode……..

Instruction to your Bank or Building Society
Please pay CAF re The Esther Benjamins Trust Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain within CAF re The Esther Benjamins Trust and if so, details will be passed electronically to my Bank/Building Society.

Signature……..

Date

| | | - | | | - | | | | |

Banks and Building Societies may not accept Direct Debit Instructions for some types of account
On receipt of your Direct Debit instruction we will send you your Direct Debit Guarantee

Please complete this section if you are a UK taxpayer so that your donation will be worth almost a third more:

GIFT AID DECLARATION

giftaid it

I am a UK tax payer and I would like The Esther Benjamins Trust to reclaim the tax on this and any donations I make from the date of this declaration, until I notify you otherwise. I confirm I pay as much income or capital gains tax as The Esther Benjamins Trust will reclaim in the tax year (currently 28p for every £1 you donate)

Print name ……

Signature……Date……

It is more cost-effective for us to include this declaration on all donation forms. If you are unsure whether you have made a Gift Aid declaration previously and are eligible to do so, please sign this statement. **Higher rate tax payers can claim further tax relief in their Self Assessment return.**