

giftaid it

MAKING A CHARITABLE DONATION

The Eyecare Trust is a major force in the UK raising awareness of ocular health issues and promoting the benefits of corrective and protective optics, as well as the benefits of quality eyewear. Foremost in the calendar of annual campaigns run by the Trust is National Eye Week.

The Eyecare Trust is a Registered Charity (No 1086416) regulated by the Charities Commission. Every penny raised by the Trust is used for promoting good vision care.

Charitable donations provide a valuable source of income and help to expand the scope and effectiveness of the Trust's work.

What's more, if you link your donations to the Gift Aid scheme by completing the simple form below, your contribution will be worth an extra 28p in the £. To sign up to Gift Aid you simply need to complete the form below.

You are, of course, free to terminate your Gift Aid agreement at any time. All we ask is that you please let us know if you no longer pay enough tax or if you change your name or address.

All donations help us promote ocular health – please give what you can

DONATION FORM

I enclose a cheque for: £ (please make cheques payable to: The Eyecare Trust)

Please send me details of payroll giving Please send me details of Eyecare Trust membership

IF YOU WISH TO PAY BY STANDING ORDER, PLEASE COMPLETE THE SECTION BELOW

TO THE MANAGER (Your Bank) Sort Code — —

BANK ADDRESS

Please pay to Cater Allen Private Bank, 9 Nelson Street, Bradford BD1 5AN, Sort Code 16-57-10 for the credit of the Eyecare Trust (Registered Charity 1086146), Account No. 53515249

THE SUM OF £ (amount in figures) (amount in words)

ON (date) and at monthly/quarterly/annual* intervals until further notice

GIFT AID DECLARATION

I am a UK taxpayer. Please reclaim the tax on all my donations to the Eyecare Trust made since 6th April 2000 and any I make in the future, until I notify you otherwise. I am currently paying income tax or capital gains tax that is equal to or more than the tax deducted from my donation.

DONOR'S FULL NAMES

ADDRESS AND TELEPHONE

SIGNED DATE

* Please delete as appropriate

This banker's Order is in addition to any other standing instruction in favour of the Eyecare Trust

PLEASE COMPLETE THE APPROPRIATE SECTIONS AND RETURN THIS FORM WITH YOUR DONATION TO: Eyecare Trust, PO Box 804, Aylesbury, Bucks HP20 9DF

