



## Gift Aid Declaration

### Details of Donor

Title \_\_\_\_\_ Forename \_\_\_\_\_ Surname \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

**I want the charity to treat** *\*delete as appropriate*

\*the enclosed donation of £\_\_\_\_\_ as a Gift Aid donation

\*the donation(s) of £\_\_\_\_\_ which I made on ...../...../..... As (a) Gift Aid donation(s)

\*all donations that I make from the date of this declaration until I notify you otherwise as Gift Aid donations

\*all donations I have made for the six years prior to this year and all donations I make from the date of this declaration until I notify you otherwise as Gift Aid donations

**You must pay Income Tax and/or Capital Gains Tax at least equal to the tax that the charity reclaims on your donations in the appropriate tax year (currently 28p for each £1 you give).**

Date: \_\_\_\_\_

### Notes:

You can cancel this declaration at any time by notifying Action for Sick Children (Scotland).

If your circumstances change and you no longer pay tax on your income and capital gains equal to the tax the charity reclaims, you can cancel your declaration.

If you pay tax at the higher rate you can claim further tax relief in your Self Assessment tax return

If you are unsure whether your donations qualify for Gift Aid tax relief, contact Action for Sick Children on 0131 553 6553, or refer to help sheet IR65 on the HMRC website.

Please notify Action for Sick Children (Scotland) if you change your name or address.

PLEASE COMPLETE AND RETURN THIS FORM BY POST TO ACTION FOR SICK CHILDREN (SCOTLAND) 22 LAURIE STREET, EDINBURGH EH6 7AB