

Donation form



Name: _____

Event name: _____

giftaid it

We, who have given our names and addresses below, and who have ticked the box entitled 'Gift Aid', want Tearfund to reclaim tax on the donation detailed below, given on the date shown. We understand that each of us must pay Income Tax or Capital Gains Tax equal to the tax reclaimed by the charity on the donation. We will tell Toilet Twinning if we are no longer UK taxpayers.

Please ensure ALL columns are filled in or we will not be able to claim Gift Aid

Event date:

Please ensure the date is filled in or we will not be able to claim Gift Aid

1	Full name and title	Full home address		Postcode
	Total amount	£ <input type="text"/>	Gift Aid (✓) <input type="checkbox"/>	Happy to hear from Toilet Twinning (✓) <input type="checkbox"/>
2	Full name and title	Full home address		Postcode
	Total amount	£ <input type="text"/>	Gift Aid (✓) <input type="checkbox"/>	Happy to hear from Toilet Twinning (✓) <input type="checkbox"/>
3	Full name and title	Full home address		Postcode
	Total amount	£ <input type="text"/>	Gift Aid (✓) <input type="checkbox"/>	Happy to hear from Toilet Twinning (✓) <input type="checkbox"/>
4	Full name and title	Full home address		Postcode
	Total amount	£ <input type="text"/>	Gift Aid (✓) <input type="checkbox"/>	Happy to hear from Toilet Twinning (✓) <input type="checkbox"/>
5	Full name and title	Full home address		Postcode
	Total amount	£ <input type="text"/>	Gift Aid (✓) <input type="checkbox"/>	Happy to hear from Toilet Twinning (✓) <input type="checkbox"/>
6	Full name and title	Full home address		Postcode
	Total amount	£ <input type="text"/>	Gift Aid (✓) <input type="checkbox"/>	Happy to hear from Toilet Twinning (✓) <input type="checkbox"/>

Please make cheques payable to: **TOILET TWINNING.**

Return the entire form together with monies raised to:

Toilet Twinning, 1052-1054 Christchurch Road, Bournemouth, Dorset BH7 6DS

For further information please call 0300 321 3217 or visit www.toilettwinning.org

Please photocopy this form if you need to.

Data Protection Act: To process these donations Toilet Twinning will need to retain your details; however we will not contact you unless you have expressed permission.

Toilet Twinning is part of Tearfund, registered charity No. 265464 (England and Wales) No. SC037624 (Scotland).



7	Full name and title	Full home address	
		Postcode	
Total amount £ <input style="width: 150px;" type="text"/>		Gift Aid (✓) <input type="checkbox"/>	Happy to hear from Toilet Twinning (✓) <input type="checkbox"/>
		Signature	
8	Full name and title	Full home address	
		Postcode	
Total amount £ <input style="width: 150px;" type="text"/>		Gift Aid (✓) <input type="checkbox"/>	Happy to hear from Toilet Twinning (✓) <input type="checkbox"/>
		Signature	
9	Full name and title	Full home address	
		Postcode	
Total amount £ <input style="width: 150px;" type="text"/>		Gift Aid (✓) <input type="checkbox"/>	Happy to hear from Toilet Twinning (✓) <input type="checkbox"/>
		Signature	
10	Full name and title	Full home address	
		Postcode	
Total amount £ <input style="width: 150px;" type="text"/>		Gift Aid (✓) <input type="checkbox"/>	Happy to hear from Toilet Twinning (✓) <input type="checkbox"/>
		Signature	
11	Full name and title	Full home address	
		Postcode	
Total amount £ <input style="width: 150px;" type="text"/>		Gift Aid (✓) <input type="checkbox"/>	Happy to hear from Toilet Twinning (✓) <input type="checkbox"/>
		Signature	
12	Full name and title	Full home address	
		Postcode	
Total amount £ <input style="width: 150px;" type="text"/>		Gift Aid (✓) <input type="checkbox"/>	Happy to hear from Toilet Twinning (✓) <input type="checkbox"/>
		Signature	
13	Full name and title	Full home address	
		Postcode	
Total amount £ <input style="width: 150px;" type="text"/>		Gift Aid (✓) <input type="checkbox"/>	Happy to hear from Toilet Twinning (✓) <input type="checkbox"/>
		Signature	
14	Full name and title	Full home address	
		Postcode	
Total amount £ <input style="width: 150px;" type="text"/>		Gift Aid (✓) <input type="checkbox"/>	Happy to hear from Toilet Twinning (✓) <input type="checkbox"/>
		Signature	
15	Full name and title	Full home address	
		Postcode	
Total amount £ <input style="width: 150px;" type="text"/>		Gift Aid (✓) <input type="checkbox"/>	Happy to hear from Toilet Twinning (✓) <input type="checkbox"/>
		Signature	

For office use only

Total	Date banked
Total Gift Aided	Supporter no

Event total amount	£ <input style="width: 100px;" type="text"/>
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