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Office use only

More options available online, including personalisation of your certificate, and choice of country.

<b>TWINNING</b>	I would like to <b>twin</b> <input type="text"/> toilet/s at <b>£60</b> each .....	£ <input type="text"/>	sub-total
	I would like to <b>twin</b> <input type="text"/> school block/s at <b>£240</b> each .....	£ <input type="text"/>	sub-total
	I would like to make an <b>additional donation</b> of .....	£ <input type="text"/>	sub-total

**Why not add something from our Gift range for your friends and family**

<b>GIFTS</b>	I would like <input type="text"/> gift box loo roll/s at <b>£8</b> each .....	£ <input type="text"/>	<b>100% of profits go to our programmes</b>
	I would like <input type="text"/> gift box soap bar/s at <b>£6</b> each .....	£ <input type="text"/>	

<b>POSTAGE</b>	Please consider making a <i>donation</i> of <b>£3</b> to cover <b>UK</b> postage and packing .....	<b>£3</b>	Please tick if you wish to <b>donate £3</b> to cover P&P
	For <b>international</b> orders, please include a <i>mandatory</i> <b>£5</b> to cover postage .....	<b>£5</b>	Please tick if your order is international <b>£5 P&amp;P</b>

<b>TOTAL</b>	Please accept my <b>TOTAL TWINNING</b> gift of .....	£ <input type="text"/>	<b>Please add all the above totals together</b>
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Title: \_\_\_\_\_ First name: \_\_\_\_\_ Surname: \_\_\_\_\_

Home address: \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

Daytime Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

How you heard about us:  Event  Church  School  Other  please state here: \_\_\_\_\_

**Delivery name & address IF different from above:** \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

**Toilet Twinning and Tearfund** value your support and promises to respect your privacy. The data we gather and hold is managed in strict accordance with the Data Protection Act (1998). We would like to keep you informed about the vital work we do by email and telephone. If you **DO NOT** want to receive this information please let us know by ticking this box.  Your personal information will **NOT** be passed on to any other organisations.

## You can make your donation worth 25% more

I want to Gift Aid my donation to Toilet Twinning. I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference. Tearfund will claim 25p for each £1 you give on Toilet Twinning's behalf. **Your home address is needed to identify you as a current UK taxpayer.**

*giftaid it*

Signature     Today's date

*Please notify Toilet Twinning if you: A) Want to cancel this declaration. B) Change your name or home address. C) No longer pay sufficient tax on your income and/or capital gains. If you pay Income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your Self-Assessment tax return or ask HM Revenue and Customs to adjust your tax code.*

I enclose a cheque <input type="text"/> (payable to <b>Toilet Twinning</b> )	I enclose a CAF voucher <input type="text"/>	<b>please note – you cannot use CAF vouchers for loo rolls and soap bars</b>
Please charge my Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Maestro <input type="checkbox"/> Electron <input type="checkbox"/>		
Name on card <input type="text"/>		
Expiry date: <input type="text"/> / <input type="text"/>	Start date: <input type="text"/> / <input type="text"/>	Issue no: <input type="text"/> (Maestro only)
Card No. <input type="text"/>	<b>Security Number:</b> <input type="text"/>	(Last three digits on the signature strip)
Signature: <input type="text"/>	Date: <input type="text"/>	<b>Thank you</b>

**Please return to: Toilet Twinning, 1052-1054 Christchurch Rd, Bournemouth BH7 6DS**