Your donation

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| --- | --- |
| Full name:  Contact email: | Address (including postcode):  Contact telephone: |

* **Donate by credit/debit card**

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| I wish to pay by: Visa/MasterCard/Amex/Maestro  I authorise you to debit my card with £  Your name (as shown on card):  Card number: | Start date:  Expiry date:  Issue number (Switch/Maestro only):  Card security number: |

* **Donate by standing order**

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| To the Manager (name and address of your bank):  Please pay: TB Alert  HSBC, 31 Euston Rd, London NW1 2ST  Account No. 91203274  Sort Code: 40-04-07  The sum of £ each month/quarter/year  Start date (at least one month from now): | Account number:  Sort code:  Account name(s):  Signed:  Date:  This instruction supersedes all previous standing orders from this account in favour of TB Alert. |

* **Donate by Cheque/CAF/Charity Voucher:** (Please make cheques made payable to TB Alert)

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| Gift Aid 50mm black.jpgI confirm I have paid or will pay an amount of Income Tax and/or Capital Gains Tax for each tax year (06 April to 05 April) that is at least equal to the amount of tax that TB Alert will reclaim on my gifts for that tax year. I understand the charity will reclaim 28p of tax on every £1 that I gave up to 05 April 2008 and  will reclaim 25p of tax on every £1 that I give on or after 06 April 2008. | |
| Date:  Signature : | Please notify TB Alert if you:   * want to cancel this declaration * change your name or home address * no longer pay sufficient tax on your income and/or capital gains for TB Alert to claim Gift Aid. |
| If you are a higher or additional rate tax payer and want to receive your additional tax relief, include your Gift Aid donations on your Self Assessment tax return or ask HM Revenue and Customs to adjust your tax code. | |

**Please return this form to TB Alert, Community Base, 113 Queens Road, Brighton, BN1 3XG. Thank you.**