

CITYLIFE STANDING ORDER AND GIFT AID FORM

Please complete this form and return it to the address below. (Do not send it to your bank)

PERSONAL DETAILS

Name: _____

Address: _____

Post Code: _____ Tel No: _____

YOUR BANK DETAILS

Name of Bank: _____

Address of Bank: _____

Post Code: _____

Account Number: _____ Sort Code: _____

Please pay Citylife £ _____ per month starting on ____/____/____ (date) until further notice

Please pay the above amount on the same day every month to Lloyds TSB, 28 Hanover Street, Edinburgh, EH2 2DS. Account: 00002456, Sort Code: 30-25-81.

Signed: _____ Date: _____

GIFT AID DECLARATION

Name: _____

Address: _____

Post Code: _____

I confirm that I pay tax in the UK and I wish all my donations to Citylife to be treated as Gift Aid Donations until further notice.

Signed: _____ Date: _____

NB: You must pay as much income tax or capital gains tax equal to the tax reclaimed by Citylife. Please advise us if your circumstances or address change so that we can amend our records.