

# Saffron Walden Almshouses | Crocus Campaign Gift Card

## PERSONAL DETAILS

Title: \_\_\_\_\_ First name: \_\_\_\_\_ Surname: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ Tel: \_\_\_\_\_ Email: \_\_\_\_\_

I would like to remain anonymous. If you do not tick this box, names (but never amounts) may be listed on our website

## PLEDGE DECLARATION

I am/we are pleased to support Saffron Walden Almshouses by making my/our gift of:

£ \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I would like this gift to be used towards the new accommodation project.

**Method of payment:** (Please tick those appropriate)

Cheque (Saffron Walden Almshouses)

**Amount:** \_\_\_\_\_ **Frequency:** (Please tick)  Monthly  Quarterly  Biannually  Annually

**Date of first Payment:** DD / MM / YYYY and for \_\_\_\_\_ years or until further notice.

Standing Order (complete attached form)

For **Credit Card** payments, **Electronic Bank Transfers**, **Legacies** or any other type of gift please contact Amy Stevens on: Tel: 07711 157983 or Email: amy.stevens@giftedphilanthropy.com

## STANDING ORDER

Please make the following payment to: Saffron Walden Almshouses

Sort Code: 20 74 05 Account Number: 13037991

**Gift Amount:** £ \_\_\_\_\_

**Date of first Payment:** DD / MM / YYYY and for \_\_\_\_\_ years or until further notice.

**Frequency:** (Please tick)  Monthly  Quarterly  Biannually  Annually

**Name of your bank/building society branch:** \_\_\_\_\_

**Bank/building society address:** \_\_\_\_\_

**Account Holder:** \_\_\_\_\_ **Sort Code:** \_\_\_\_ - \_\_\_\_ - \_\_\_\_ **Acc no:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

PLEASE ALLOW 4 WEEKS FROM THE RETURN OF YOUR FORM TO THE START OF YOUR BANKER'S ORDER.

- I will set up the standing order myself
- I would like Saffron Walden Almshouses to post this to my bank

## GIFT AID DECLARATION

By using Gift Aid you can increase the value of your gift to Saffron Walden Almshouses by 25p per £1 given

- Please treat all gifts of money that I make today and in the future to the charity as Gift Aid donations.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I understand that I must pay an amount of Income Tax and/or Capital Gains Tax at least equal to the tax the charity reclaims on my gift/s in the appropriate tax year. I understand that other taxes such as VAT and Council Tax do not qualify. I am under no obligation to make any further donations and I can cancel this declaration at any time. Please notify Saffron Walden Almshouses if your circumstances change.