



## REGULAR GIVING

NAME

ADDRESS

POSTCODE

TELEPHONE

EMAIL

## STANDING ORDER

TO: *(Name and address of your bank)*

BANK NAME

BANK ADDRESS

POSTCODE

Please pay Ashburnham Christian Trust, A/c 59557796 Sort Code 60 02 07

£

MONTHLY/QUARTERLY/ANNUALLY

*(enter date of first payment)*

/ /

and monthly/quarterly/annually on this date until further notice. PLEASE DEBIT MY

ACCOUNT NO:

SORT CODE:

SIGNED

DATE

## GIFT AID

YOU CAN INCREASE THE VALUE OF YOUR DONATION  
BY COMPLETING THE FOLLOWING DECLARATION.

Please treat the enclosed donation and all further donations I make to Ashburnham Christian Trust as Gift Aid donations. I understand that I must pay Income Tax / Capital Gains Tax that is at least equal to the amount of tax that Ashburnham Christian Trust will reclaim on my donations in each tax year.

SIGNED

DATE