REG CHARITY No. 1106379

Follow Your Dreams Ltd
26 High Street, Barry CF62 7EB
Telephone 01446 739452/701426
admin@followyourdreams.org.uk
www.followyourdreams.org.uk

I WANT TO HELP

2584

You must be over 18 to complete this form

Date		Business		
Area		Fundraiser		

Contact Name	

Business Address	
	Postcode

Telephone Number	Home	
	Work	
	Mobile	
Email		

Your Bank Details

To the Manager of:		For Bank Use	
Bank Name			
Bank Address			
Name of Account Holder/s			
Sort Code		Account No.	

Payable To:			
Name of Bank:	Lloyds Bank PLC		
Address	514 Cowbridge Rd East, Cardiff CF5 1BL		
Sort Code	30-98-94	Account No.	25736 77

I wish to donate

☐ £10 ☐ £30 ☐ £50 ☐ £100

Starting on: ☐☐–☐☐–☐☐☐☐ and thereafter every month until further notice

Signed		Date	☐☐–☐☐–☐☐☐☐
Position			

GIFT AID DECLARATION

☐ I am a UK taxpayer. Please reclaim the tax on all my donations to Follow Your Dreams made since 6th April 2000 and any I make in the future, until I notify you otherwise. Date ☐☐–☐☐–☐☐☐☐

Gift Aid Notes: In the tax year you need to pay enough income tax and/or capital gains tax to cover the amount that we shall be claiming back from the Inland Revenue (at present we may claim 28p for each £1donated, equivalent to income tax at 22%) You may end this arrangement at any time. Please let us know if you no longer pay enough tax (but note that you may stop working but still be paying tax)

THE FUNDRAISER YOU ARE SPEAKING TO IS WORKING DIRECTLY FOR THE CHARITY