Follow Your Dreams

REG CHARITY No. 1106379
Follow Your Dreams Ltd
26 High Street, Barry CF62 7EB
Telephone 01446 739452/701426

www.followyourdreams.org.uk **admin@followyourdreams.org.uk**

I WANT TO HELP

You must be over 18 to complete this form 864

Date								T.L.												
Area								Fundraiser												

Title						Name														
Date of Birth																				

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

☐ £5 ☐ £10 ☐ £20 ☐ Other £.....

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

Signed		Date	☐☐–☐☐–☐☐☐☐

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