

Dorset Child and Family Counselling Trust

Application to become a Friend

Please enrol me as a Friend of the Trust.

Title (Mr/Mrs/Miss/Ms/Other)

Surname

Forenames

Address.....

.....

Postcode.....

Telephone number.....

Email.....

1. I wish to pay the following: -

Annual subscription (£30)

Life membership (£300)

Donation

Total

Please tick one or more of the following, as appropriate:-

I enclose cash/cheque for £.....

I would like to pay annual subscriptions by Banker's Standing Order, and have completed the form alongside.

Please send me information about Life membership

Signed

Date.....

2 I wish to help in other ways as a DCFCT friend (volunteering, fundraising etc)

Please post form to DCFCT
Nethergrove House, Portesham,
DORSET, DT3 4ES

Dorset Child and Family Counselling Trust

Charity No. 1112739

Gift Aid Declaration

Details of Donor:

Title (Mr/Mrs/Miss/Ms/Other)

Surname.....

Forenames

Address.....

.....

Postcode.....

I want the above named charity to treat the donation Of £..... that I made on..... and all subsequent donations I have made since then, or, until further notice, will make, as Gift Aid donations.

Signed.....

Date.....

Notes to donor

You must pay an amount of income tax and/or capital gains tax at least equal to the tax that the charity reclaims on your donations in the tax year (currently equal to 28p for each £1 you give).

If your circumstances change and you no longer pay sufficient tax to cover the tax which the charity reclaims on your donation, you need to cancel your declaration.

In any event you can cancel your declaration at any time for whatever reason you wish by notifying the charity.

If you pay tax at the higher rate you can claim relief at the higher rate element on your Gift Aid donations.

Banker's Standing Order Form

To **Bank**

Address

.....

Postcode.....

Please pay Lloyds TSB Bank plc,
1 High West Street, Dorchester,
Dorset DT1 1UG
(Sort code 30 - 92 - 69)

for the credit of Dorset Child and Family
Counselling Trust, Account No. 1309282.

The sum of £..... :

- on receipt of this form, and
- thereafter on 1st October annually

Name

Address.....

.....

Postcode.....

Bank account No.....

Signed

Date.....