

Holy Trinity Church, Hildersham
Donation Pledge Form Please return the form to:

Andrew Westwood-Bate, 5 Sleaford Close, Balsham, Cambridge CB21 4DP

Holy Trinity
Hildersham

Personal Details:

Title: _____ First Name: _____ Surname: _____

Address: _____

Postcode: _____

Tel: _____ Mobile: _____ Email: _____

Pledge Declaration

I am/we are pleased to support Holy Trinity Church, Hildersham by making my/our gift of: £ _____

Signature: _____

Dated: ___/___/___

Method of Payment: (Please tick those appropriate)

My/our gift will be made by cheque or by Standing Order

Please make your cheques payable to **Holy Trinity Hildersham PCC** or if paying by standing order, please complete the section below (Please delete multi-choices as appropriate)

Standing Order

Please make the following payment to: **Hildersham Parochial Church Council Number 1 Account** at Barclays Bank PLC, Leicester LE87 2BB This new Standing Order cancels any previous Standing Order to Holy Trinity Hildersham PCC

Sort Code: 20 - 17 - 19

Account No: 30476358

Gift Amount: £ _____ (in words) £ _____ (amount)

Date of first payment: DD / MM / YYYY and for _____ Years or until further notice

Frequency: Please tick Monthly Quarterly Annually

Name of your Bank / Building Society: _____ Branch: _____

Bank/ Building Society address: _____

Account Holder Name: _____ Sort Code: ___ - ___ - ___ Acc No: _____

Signature: _____

Dated: ___/___/___

PLEASE ALLOW FOUR WEEKS FROM THE RETURN OF YOUR FORM TO THE START DATE OF YOU STANDING ORDER
PLEASE DO NOT SEND THIS FORM TO YOUR BANK - WE WILL FORWARD IT TO THEM AFTER RECORDING YOUR GIFT

Gift Aid Declaration

This will increase your gift by 25p for every £1 given (at current rate), at no extra cost to you or us. Thank You

Please treat as Gift Aid donations all qualifying gifts of money made from the date of this declaration and in the past four years. I confirm I am a UK Taxpayer and I understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference

Signature: _____

Dated: ___/___/___

I am under no obligation to make any further donations and can cancel this declaration at any time. Please notify us if your circumstance change.

By signing this form you are confirming that you are consenting to the PCC of the Ecclesiastical Parish of Holy Trinity, Hildersham and the Parish Nurse Management team holding and processing your personal data for the purpose of keeping me informed of events, news, activities and services. (Please tick the boxes where you grant consent):-I consent to the above groups contacting me by post phone or email.

Signature: _____

Dated: ___/___/___