



Gift Aid Declaration for UK tax payers

giftaid it

Please complete your details in BLOCK CAPITALS

MR / MRS / MS _____ FIRST NAMES _____ SURNAME _____

HOME Address _____ POSTCODE _____

Optional additional information (if you don't mind us contacting you this way): Email _____ Phone _____

As a UK tax payer, I understand that if I pay less Income Tax and/or Capital Gains Tax for each tax year (6 April to 5 April) than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference. I understand the charity will reclaim 25p of tax on every £1 that I give.

Please choose ONE of the following options

- I wish Elim to treat as Gift Aid, all my donations made in the last 4 years, or since **DD / MM / YYYY** and all donations I make hereafter.
- OR
- I wish Elim to treat as Gift Aid, only my single donation of £ _____ given **DD / MM / YYYY**
(If you select this option you will need to complete a new declaration for other donations)

Signature _____ Date _____

If you are giving regularly, please consider doing so by monthly standing order

OFFICE USE

Benefitting church/dept:

Church Name: [Click here to enter text.](#)

Elim Church Code: [Click here to enter text.](#)

Elim Foursquare Gospel Alliance Registered Charity 251549 (England and Wales) SC037754 (Scotland)

Local reference _____ Elim HQ GAD reference _____