

1A One off gift

I wish to donate: ☐ £25 ☐ £50 ☐ £100

Or my preferred amount of

☐ I enclose my cheque/postal order/CAF charity voucher made payable to: **Police Care UK**

☐ Debit my Maestro/MasterCard/Visa/American Express

Card number:

Expiry date:

 /

(Card security code)

Name as it appears on card:

Date: / /

2 Are you a UK tax payer? *giftaid it*

☐ Yes, i confirm that i am a UK taxpayer and give Police Care UK permission to claim 25p from the government per every £1 i donate. I understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed in that tax year it is my responsibility to pay any difference. Please treat as Gift Aid donations all qualifying gifts of money made today, in the past four years and the future. Please let us know if your name or home address changes, if you wish to cancel your Gift Aid declaration, or if your tax circumstances change.

☐ No, i am not a UK tax payer

3 Your Contact Details

Full Name:

Address:

Town/City: Postcode:

Email:

Telephone number:

We take your privacy seriously and will never sell your data. See our privacy policy for further info:

www.policicare.org.uk/privacy-policy on how we use your data. To stop receiving communication materials from us, email fundraising@policicare.org.uk or call 0300 012 0030 (Mon-Fri, 9am to 5pm)

Thank you for your kind support!

Complete and return the form to: fundraising@policicare.org.uk or send back by post using our freepost address to:

RUJB-JTAT-JLJS
Police Care UK - Fundraising Dpt
Unit 6, Albion House
High Street, Woking
GU21 6BG

1B Set up a regular donation

I would like give each month: ☐ £5 ☐ £10 ☐ £20 ☐ £

(Please specify your preferred collection date and starting month. If the collection date selected falls within the next 6 days, the first payment may be collected the following month.)

Starting on the: ☐ 1st ☐ 15th ☐ 22nd Month:

Name(s) of Account Holder

Branch Sort Code

*Direct Debit mandates are securely processed by

blackbaud
Merchant services

Bank / Building Society Account Number

Name of your Bank or Building Society

Instruction to your Bank or Building Society to pay by Direct Debit

Please pay Police Care UK Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with Police Care UK and, if so, details will be passed electronically to my bank/building society.

(Please note: Banks and building societies may not accept Direct Debit Instructions for some types of account and to set up a Direct Debit, you must be the account holder of a personal bank or building society account and the sole required signatory on the account.)

Signature:

/ /

4 Stay updated

We'd love to share with you, impact stories about how your support is directly helping members of the Police family and other ways to get involved. Including future events, research, fundraising campaigns, unique offers, and volunteering opportunities, as well as send you our monthly e-newsletter.

Yes, please send me information by:

☐ Email

☐ Post