

THE BATEMANS TRUST

Sponsorship and Donation Form

I would like to (Please tick a box) • sponsor a child in school / young person training (please delete) at \$\infty\$\Displays15.00 per month \$\infty\$\Displays180 per year ● sponsor a girl a boy no preference ■ donate £ _____ per month, or £ _____ per year help the work of The Batemans Trust and enclose a donation of £ ____ Please fill in your details here Title: Family name: Other names: Name by which you would like to be addressed by your child: Address: Post code: e-mail address: A little information about yourself that we can tell the child to help make you a real person (i.e. brief family details, occupation, hobbies): How did you hear about us? If you would like the child to have a picture of yourself, then please enclose a photograph **Standing Order Mandate** To: Bank/Building Society Address: HSBC SHREWSBURY BRANCH SORT CODE: 40-41-30 Please pay: For the credit of: THE BATEMANS TRUST ACCOUNT No: 21628984 QUOTING REF: (for office use only, leave blank) AMOUNT £ The sum of: (in words) until further notice in writing or else Commencing: and debit my/our account accordingly Date of 1st payment Date of last payment Due date & frequency Name of Account to be debited For donations by CAF CharityCard: Donation Date Expiry Date Amount Signature: Date:

PLEASE RETURN TO THE BATEMANS TRUST

For further details please contact us at: The Batemans Trust, 27 Stocks Lane, Steventon, Nr. Abingdon, OXON, OX13 6SS

Registered Charity No. 1072820

mail@batemans.org.uk

Or visit www.batemans.org.uk

All sponsors and friends will receive regular newsletters updating them on the Trust's work and will be invited to trust events in the UK. Sponsors will also receive letters, photos and reports on their sponsored child.

DECLARA	TION
to continue m	sponsor a child in Chennai through The Batemans Trust. If I pay by Standing Order The Batemans Trust will assume that I wish y sponsorship indefinitely unless I notify it otherwise. If I pay by cheque, I will be reminded annually. I understand that the sum o towards direct child care expenses including care, education, books, clothes, food, medical expenses, training fees etc, and care expenses, such as staffing.
I .	and that all correspondence between myself and the child will be through The Batemans Trust, who will also arrange a visit for me wish to visit the child.
Signed:	Date:
GIFT AID DE	CLARATION – for past, present & future donations
The Bateman	s Trust
Please treat a	s Gift Aid donations all qualifying gifts of money made:
Danier D	in the past 4 years in the future
today	in the past 4 years in the ratare
_ , _	xes you wish to apply.
Please tick all bo I confirm I have equal to the an for that tax yea	xes you wish to apply. P paid or will pay an amount of Income Tax and/or Capital Gains Tax for each tax year (6 April to 5 April) that is at leas nount of tax that all the charities or Community Amateur Sports Clubs (CASCs) that I donate to will reclaim on my gift
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Please notify the charity if you:

- want to cancel this declaration
- change your name or home address
- no longer pay sufficient tax on your income and/or capital gains.
- If you pay Income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your Self Assessment tax return or ask HM Revenue and Customs to adjust your tax code.