| GIFI   |  |   |                          |                           |                                   |                                  | G                          | ift Aid                       | d De                   | clara                      | tion                       | for r                      | egul                       | ar/p                     | erioc                          | dic d                    | onati                     | ions             |                  |                      |
|--|--|---|--------------------------|---------------------------|-----------------------------------|----------------------------------|----------------------------|-------------------------------|------------------------|----------------------------|----------------------------|----------------------------|----------------------------|--------------------------|--------------------------------|--------------------------|---------------------------|------------------|------------------|----------------------|
| SHREWSBURY ROMAN CATHOLIC<br>DIOCESAN TRUSTEES REGISTERED<br>Registered Charity No. 234025           |  |   |                          |                           |                                   |                                  |                            | BOL For Office Use O          |                        |                            |                            |                            |                            |                          |                                | у                        |                           |                  |                  |                      |
| Parish Church: ST GREGORY  |  |   |                          |                           |                                   |                                  |                            | Town: BOLLINGTON              |                        |                            |                            |                            |                            |                          |                                |                          |                           |                  |                  |                      |
| i  | Mr / Mrs / Miss / Ms<br>(Please delete as appropriate) |   |                          |                           |                                   |                                  |                            |                               |                        |                            |                            |                            |                            |                          |                                |                          |                           |                  |                  |                      |
| Christian<br>Name(s)   |  |   |                          |                           |                                   |                                  |                            |                               |                        |                            |                            |                            |                            |                          |                                |                          |                           |                  |                  |                      |
| Surname  |  |   |                          |                           |                                   |                                  |                            |                               |                        |                            |                            |                            |                            |                          |                                |                          |                           |                  |                  |                      |
| Full Home<br>Address   |  |   |                          |                           |                                   |                                  |                            |                               |                        |                            |                            |                            |                            |                          |                                |                          |                           |                  |                  |                      |
|  |  |   |                          |                           |                                   |                                  |                            |                               |                        |                            |                            |                            |                            |                          |                                |                          |                           |                  |                  |                      |
|  |  |   |                          |                           |                                   |                                  |                            |                               |                        |                            |                            |                            |                            |                          |                                |                          |                           |                  |                  |                      |
|  |  |   |                          |                           |                                   |                                  |                            |                               |                        |                            |                            |                            |                            |                          |                                | Po                       | stco                      | de               |                  |                      |
| I request tha<br>that I make h<br>Tax and/or C<br>responsibility                                     | nereafter<br>Capital Ga                                | shall<br>ains T                         | be tr                    | eated<br>nan th           | las C                             | Gift Aid                         | donati                     | ions.                         | I am                   | a Uk                       | (taxp                      | oaye                       | r and                      | lund                     | ersta                          | nd th                    | at if                     | l pay            | less Ir          |                      |
| Date of signature  |  | /<br>(day)                              |                          |                           |                                   | (mo                              | onth)                      |                               | / 20                   |                            |                            |                            |                            |                          |                                |                          |                           |                  |                  |                      |
| Signature of donor   |  |   |                          |                           |                                   |                                  |                            |                               |                        |                            |                            |                            |                            |                          |                                |                          |                           |                  |                  |                      |
| Please notify<br>Tax and/or C  |  |   |                          |                           |                                   |                                  |                            |                               |                        |                            | or hoi                     | me a                       | ddre                       | ss; ii                   | ) no l                         | onge                     | er pay                    | y suffi          | cient            | Income               |
| If you pay Indicate include all you code.  | come Ta<br>our Gift A                                  | x at thid do                            | ne hi                    | gher on                   | your                              | ditional<br>r Self-A             | ssess                      | ment                          | tax re                 | eturn                      | or as                      | sk HN                      | И Re                       | venu                     | ie & (                         | Custo                    | ms t                      | you,<br>o adji   | you n<br>ust yo  | nust<br>ur tax       |
| coue.  |  | Ple                                     | ease                     | indic                     | ate by                            | y ticking                        | g belov                    | w hov                         | v you                  | inter                      | nd to                      | mak                        | e you                      | ır do                    | natio                          | ns: -                    |                           |                  |                  |                      |
| By Offertory Envelope  |  |   | В                        | y Ched                    | Cheque By Banker's Standing Order |                                  |                            |                               |                        |                            |                            |                            |                            |                          |                                |                          | O Given?<br>'es / No      |                  |                  |                      |
| Env Box No.  |  |   |                          |                           |                                   |                                  |                            |                               |                        |                            |                            |                            |                            |                          |                                |                          |                           |                  |                  | mpleted?<br>'es / No |
| Protecting ye<br>This parish is<br>and stored se<br>Regulator's C<br>parish and the<br>organisations | part of the<br>curely on<br>ode of Pra<br>e Diocese    | e Dioc<br>the Di<br>actice.<br>) will u | ioceso<br>. We<br>use yo | e's da<br>do no<br>our de | tabase<br>t trans<br>tails to     | e. We c<br>sfer your<br>o admini | comply of data to ster you | with d<br>o third<br>ur gifts | ata pr<br>parties. Thi | otecti<br>es to u<br>s may | on an<br>use fo<br>/ inclu | id ma<br>or thei<br>ude sl | rketin<br>ir mar<br>haring | ig leg<br>keting<br>youi | islation<br>g or fu<br>r infor | n and<br>Indrai<br>matio | the f<br>sing p<br>n with | Fundra<br>purpos | aising<br>ses. W |                      |
| We would als appeals.  | o occasio  | nally li                                | ke to                    | send                      | you n                             | ews by p                         | post on                    | the w                         | ork of                 | the D                      | Dioces                     | se an                      | d give                     | e you                    | the o                          | pportu                   | unity t                   | to sup           | port fu          | ture                 |
| Many thanks Statement als and how to up  | o contains   | upport<br>s deta                        | i. You<br>ils on         | u can<br>how t            | read o                            | our full P                       | rivacy                     | Notice                        | at <u>w</u>            | ww.di                      | ocese                      | ofshr                      |                            |                          |                                |                          |                           |                  |                  |                      |