

**Name: ………………………………………………………………………………………………………………………………..**

**Address: …………………………………………………………………………………………………………………………….**

**……………………………………………………………………………………………………………………………………………**

**Email: …………………………………………………………………………………………………………………………………**

**Telephone: …………………………………………………………………………………………………………………………**



I would like to sponsor a child/children:

Number of Children: Male Female No preference

I would like to sponsor a child:

In annual sums of £ (minimum sponsorship level £216 per child)

By quarterly standing order of £ (minimum sponsorship level £54 per child)

OR

I would like to make in a general donation of £



Please tell us how you heard about Save a Child.

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I wish to pay by Standing Order (please arrange directly with your bank)

I will pay by direct transfer to Save a Child's account at Bank of Scotland (sort code 12-11-03 account number 00908629)

I enclose a cheque for £ made payable to “Save a Child”



Help us gain 25% extra funding – please complete and send us the separate Gift Aid form.

**Authorisation**

I confirm that I have read and accept the details of the Save a Child UK privacy notice and therefore consent to Save a Child holding and processing my data including specifically communicating with me about my donation and sponsorship of children.

I also consent to Save a Child sending me newsletters and contacting me about its activities and events.

Signed …………………………………………………………………………………..

Date………………………………………………………………………………………

**Please return this completed form to:**

**Bill Baker, Save a Child, 27 Canning Cross, London SE5 8BH**

**or by email to:**

**bill@h2glenfern.com**

**Save a Child is a Registered Charity Number 328218**

**Registered address: 27 Canning Cross, London SE5 8BH**

[**www.saveachildindia.com**](http://www.saveachildsponsoring.org)

**Standing Order Mandate**

Standing Order Mandate To: The Manager

Bank Name:

Branch Address:

Postcode:

Please pay: Bank of Scotland, West End Office

Account No: 00908629 Sort Code: 12-11-03

Payee: Save a Child

Amount £

Amount in words:

Reference: (your surname preferred)

Commencing: 1st (month) 20 (year)

and thereafter: Quarterly / Annually (delete as applicable)

on that date until further notice in writing and debit my account accordingly

Account Name:

Account No:

Sort Code:

Please cancel all previous standing order mandates made by me in favour of Save a Child.

Signature:

Name:

Address:

Postcode:

Please return this completed form to your bank or use it for the purpose of giving your on-line /telephone instructions to your bank.

**Please arrange your Standing Order payment directly with you bank either online, by phone or by sending it this form.**



**Gift Aid Declaration**

Name of charity: **Save a Child (Registered charity no 328218)**

Details of donor:

**Title: ………….. Forename: ……………………………………………………………………………………….…………………….**

**Surname: ………………………………………………………………………………………………………………………………………**

**Home Address: ……………………………………………………………………..........................................................**

**……………………………………………………………..…… Postcode: ………………**

I want to Gift Aid all donations to Save a Child that I have made for this tax year and the four years prior to the year of this declaration and all donations I make from the date of this declaration until I notify you otherwise.

I am a UK taxpayer and 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: ……………………………………………………………………………..**

**Date: ……………………………………………………………………………………**

**Notes:**

1. You can cancel this Declaration at any time by notifying Save a Child.

2. If in the future your circumstances change and you no longer pay tax on your income and capital gains equal to the tax that Save a Child reclaims, you can cancel your declaration.

3. If you pay tax at the higher rate you can claim further tax relief in your Self-Assessment tax return.

4. If you are unsure whether your donations qualify for Gift Aid tax relief, ask Save a Child.

5. Please notify Save a Child if you change your name or address.

Please return this completed form to:

***Bill Baker, Save a Child, 27 Canning Cross, London SE5 8BH***

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