

I want to give where the need is greatest

tearfund

Registered Charity No. 265464 (England & Wales)
Registered Charity No. SC037624 (Scotland)

Giving online saves on Tearfund's administration costs by 25 per cent. To make a donation please complete the form or visit tearfund.org or call 020 8977 9144

- I'm sending a single gift to the work of Tearfund
- I would like to make a monthly gift of £ starting on the
1st 8th 15th 28th (please circle one) month of until further notice.
- Please send me more information about leaving a gift to Tearfund in my will

Full name:

Address:

Postcode:

Daytime telephone no: Year of birth:

Email:

* This enables us to send you appropriate materials. **I am happy to receive information about Tearfund's work by email and I understand I can unsubscribe at any time.

The Enhanced Direct Debit Guarantee This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits. If there are any changes to the amount, date or frequency of your Direct Debit, Tearfund will notify you in advance of your account being debited. This will be 10 working days or as otherwise agreed. If you request Tearfund to collect a payment, confirmation of the amount and date will be given to you at the time of the request. If an error is made in the payment of your Direct Debit, either by Tearfund or by your bank or building society, you are entitled to a full and immediate refund from your bank or building society. Simply contact your bank or building society to arrange a refund, or if you prefer, contact Tearfund and we can arrange to repay you direct. If you receive a refund you are not entitled to, you must pay it back when Tearfund asks you to. You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify Tearfund.

Gift Aid Declaration I am a UK taxpayer and want Tearfund to claim tax on any donations that I have made in the last four years or from // and all donations I make in the future.

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I understand that I must pay an amount of Income Tax and/or Capital Gains Tax for each tax year (6 April one year to 5 April the next) that is at least equal to the amount of tax that all the charities that I donate to will reclaim on my gifts for that tax year. I understand that other taxes such as VAT and council tax do not qualify and that Tearfund will reclaim 25p of tax on every £1. I will tell Tearfund if I am no longer a taxpayer.

The tax reclaimed will be used to help fund the whole of Tearfund's work.

Signature:

Date:

Please return to: Tearfund, 100 Church Road, Teddington TW11 8QE tearfund.org

Single Donation

I would like to give £

I enclose a cheque (payable to **Tearfund**)

Visa Debit Visa Credit Mastercard Credit Mastercard Debit CAF

Please note: we are unable to accept Solo, Electron, Maestro, American Express or Diners Club cards

Cardholder name:

Card no:

<input type="text"/>																			
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Expiry date:

3 digit security code:

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(Last 3 digits on the reverse of your card)
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Signature:

Date:

Please complete the Gift Aid declaration overleaf if you are a UK taxpayer. This will enable us to claim back tax on your gift, making it worth 25% more.

Regular Donation

Service User No:

9 4 0 5 1 6



INSTRUCTION TO YOUR BANK OR BUILDING SOCIETY TO PAY BY DIRECT DEBIT

Please pay Tearfund 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 Tearfund and, if so, details will be passed electronically to my bank/building society.

Please complete this form and return it to:

Tearfund, 100 Church Road Teddington TW11 8QE. **DO NOT RETURN TO YOUR BANK**

The Manager (Name and full address of your bank)

Name:

Address:

Postcode:

Account Holder(s) Details

Name of Account Holder(s):

Branch sort code:

Bank/Building Society account No:

Reference No. (for office use only):

<input type="text"/>																			
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Signature:

Date: