**Standing Order Form**

To: The Manager,

………………………..Bank Ltd.,

…………………………………..

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Bank | | Branch Title | | | Sort Code |
| **BANK OF SCOTLAND** | | **EDINBURGH** | | | **80 - 11 - 00** |
|  | |  | | |  |
| Beneficiary’s Name | | | | | Account Number |
| **BRISTOL NOISE** | | | | | **06093263** |
|  | | | | |  |
| Amount in figures | Amount in Words | | | | |
| **£** |  | | | | |
|  | | | | | |
| Date and amount of first payment | | | | | |
|  | | | | **£** | |
|  | | | | | |
| Due Date and frequency | | | | | |
|  | | | |  | |
|  | |  |  | | |
|  | | | | | |

Please Pay

For the credit of

The Sum of

Commencing

And thereafter every

Quoting the reference:

Until further notice and debit my/our account accordingly.

This instruction cancels any previous order in favour of the beneficiary named above, under this reference.

|  |
| --- |
| Special Instructions: |

|  |
| --- |
| Name of Account to be Debited |
|  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Sort Code | | | | | |  | Account Number | | | | | | | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |
| --- | --- |
| Signature(s) |  |
|  |

**Charity Gift Aid Declaration** *–* multiple donation

|  |
| --- |
| **Boost your donation by 25p of Gift Aid for every £1 you donate**  Gift Aid is reclaimed by the charity from the tax you pay for the current tax year. Your address is  needed to identify you as a current UK taxpayer. |

**In order to Gift Aid your donation you must tick the box below:**

I want to Gift Aid my donation of £\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and any donations I make in the future or have made in the past 4 years to:

**Name of Charity: BRISTOL NOISE**

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.

*Please tick to confirm the above statement:*

**My Details**

|  |  |
| --- | --- |
| **Title** |  |
| **First name or initial(s)** |  |
| **Surname** |  |
| **Full home address** |  |
|  |
| **Postcode** |  |
| **Date** |  |

**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.