

# Standing Order Instruction



Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ PostCode: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

*If you are happy to be contacted by phone or email please provide your details in the space provided above.*

To The Manager (*Bank name and address*): \_\_\_\_\_

**Please pay The Bereavement Counselling Charity (Sort Code: 40-52-40 Account No: 00034104) the amount of £\_\_\_\_\_ from the following account:**

Name(s) of Account Holder(s): \_\_\_\_\_

Account No: 

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 Sort Code: 

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Starting on: 

D	D
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M	M
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Y	Y	Y	Y
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 and monthly thereafter until further notice.

Signature(s): \_\_\_\_\_ Date: \_\_\_\_\_

## Make your gift worth more at no extra cost to you!

If you are a UK tax payer, The Bereavement Counselling Charity can claim an additional 25p for each £1 that you donate. Please tick the appropriate box below to confirm your consent and tax status.

*giftaid it*

- I am a UK tax payer. Please treat all donations I make as Gift Aid donations until further notice. I understand that I must pay UK income or capital gains tax, at least equal to the amount of tax reclaimed on my donations in each tax year (currently 25p for each £1 given).
- I am not a UK tax payer and my donations are not eligible for Gift Aid.

*Please notify us of any change to your name, home address or tax status.*

Please return to:

The Bereavement Counselling Charity  
PO Box 250, Petersfield, Hampshire GU32 9EJ

Charity Gift Aid Number: ZD12581

Thank you