

## Direct Debit Donation Form

Please become a regular supporter of DGSM yourChoice by filling in this form and sending back to us.

Title: ..... Forename: ..... Surname: .....

Address: .....

..... Post Code: .....

Gift Aid makes every £1 worth £1.28 *giftaid it*

I am a UK Tax Payer, and I would like DGSM yourChoice to reclaim the tax on all donations I have made as well as any future donations.

Yes  No

*I understand that I must have paid an amount of tax or capital gains tax at least equal to the amount of tax that the charity will claim in the tax year.*

I WOULD LIKE TO GIVE £ \_\_\_\_\_ per month / quarter / year (delete as appropriate)

starting on the 5<sup>th</sup> / 20<sup>th</sup> (delete as appropriate) of \_\_\_\_\_ (month) \_\_\_\_\_ (year) \*allow 1 month from today

### DGSM yourChoice

Instruction to your Bank or Building Society to pay by Direct Debit



Please fill in the boxes 1 – 5 including the including official use box using a ball point pen and return it to:

DGSM yourChoice 53 Highfield Road Dartford, Kent, DA1 2JS
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Service User Number

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Name(s) of Account Holder(s)

1 

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Reference Number (to be completed by the British Red Cross)

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Bank/ Building Society account number

2 

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Branch Sort Code

3 

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### Instruction to your Bank or Building Society

Please pay DGSM yourChoice Direct Debits from the account detailed in this instruction, subject to the safeguards assured by the Direct Debit Guarantee. I understand this instruction may remain with DGSM yourChoice and, if so, details may be passed electronically to my Bank/Building Society.

Name and full postal address of your Bank and Building Society

4 

To the Manager: _____	Bank/Building Society
Name of Bank _____	
Address _____	
_____ Postcode _____	

5

Signature(s) _____
Print Name _____
Date _____

