



Gift Form

I wish to give a regular donation for my church

Please tick to confirm you have read and understood the information on pages 1 and 2, including the Frequently Asked Questions.

I wish my donation to be used solely for the benefit of:

Church / Parish name **ST GILES**
 PGS Parish code **270627115**
 In the village / town / city of **HORSPATH**
 In the Diocese of **OXFORD**

Title: Mr Mrs Miss Ms Other

First name(s):
 Surname(s):
 Full home address:
 Postcode:
 Telephone:
 Email:

I wish to support my parish in the future by agreeing to an annual inflationary increase on my gift. Please tick **Yes**

I understand that the new amount will be communicated to me by letter 30 days prior to the gift donation date. I have the right to opt out of this arrangement at any point in the future by communicating my wishes by letter, email or phone to the Parish Giving Scheme.

I wish to donate

Please tick one **per month** **quarter** **year**
to the Parish Giving Scheme Registered Charity Number: 1156606

Starting on the 1st* of..... (month)..... (year)

* Please allow one month from today
 NB: Only you can cancel your existing Standing Order

I wish to remain anonymous to my parish's Planned Giving Representative (please carefully read 'How will our parish be notified of my donation?' on page 2)

I wish to Gift Aid my donation *giftaid it*
Gift Aid makes every £1 worth £1.25

Please treat as Gift Aid donations all qualifying gifts of money made from the date of my first gift on this declaration and in the future. I am a UK tax payer 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. I understand the charity will reclaim 25p for every £1 that I give.

Signature **Title:**

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



Name and full postal address of your Bank/Building Society

To: The Manager Bank/Building Society
 Address:
 Postcode:

Service User Number
 4 2 1 4 0 2

Donor reference number (to be completed by PGS office)
 P G S T H A N K Y O U

Name(s) of Account Holder(s)

Branch Sort Code

Bank / Building Society account number

Instruction to your Bank or Building Society

Please pay Parish Giving Scheme 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 Parish Giving Scheme and, if so, details will be passed electronically to my Bank / Building Society.

Signature(s)
 Date

Please complete this page and send it to: **Parish Giving Scheme, 76 Kingsholm Road, Gloucester, GL1 3BD**

CUT HERE

This Guarantee should be detached and retained by the payer
The 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 PGS will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request PGS 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, by PGS or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society.
- ✓ If you receive a refund you are not entitled to, you must pay it back when PGS 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 us.