

# Friends of Daisi

Registered Charity No. 1071762



## Application Form

To: Friends of Daisi, Daisi Office, Exeter Library, Castle Street, Exeter EX4 3PQ

I/We wish to become:

Individual Friend: Monthly standing order £3 per month

Joint Friends\*: Monthly standing order £5 per month

Corporate Friend: Monthly standing order £8 per month

\* Joint membership is for two people at the same address only.

Or I would like to make a one off donation of £ \_\_\_\_\_

Name(s) and title(s): \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_

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

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

I have made a BACS payment/enclose a cheque (payable to Daisi) for the sum of £ \_\_\_\_\_

I enclose a Banker's Standing Order for the annual sum of £ \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Friends of Daisi**  
Registered Charity No. 1071762



**Banker's Standing Order Authority**

To the Manager of

\_\_\_\_\_ Bank plc

(Address)

\_\_\_\_\_  
\_\_\_\_\_

Please pay on the \_\_\_\_\_ day of \_\_\_\_\_ (month)

and in every month thereafter until further notice the sum of £ \_\_\_\_\_

To: CAF Bank Ltd

**For the credit of Daisi, Account no. 00019221, Sort code 40-52-40.**

Account name \_\_\_\_\_

Account address \_\_\_\_\_  
\_\_\_\_\_

Sort code and account number \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Please return this form to: Friends of Daisi, Daisi Office, Exeter Library, Castle Street, Exeter EX4 3PQ

<p>For bank use only: Please quote payment reference Daisi Friends Scheme.</p>
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# Friends of Daisi

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## Charity Gift Aid Declaration – donations

**Boost your donation by 25p of Gift Aid for every £1 you donate.**

Gift Aid is reclaimed by Daisi 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 regular/single donation of £\_\_\_\_\_ to:

**Name of Charity:** Devon Arts in Schools Initiative (DAISI)

I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax in the current tax year than the amount of Gift Aid claimed on all my donations it is my responsibility to pay any difference.

### 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.

**Please keep a copy of this form for your records.**

