

Gift Aid Declaration Form

RECEIPT No: _____

YORKSHIRE CANCER CENTRE (Leeds Teaching Hospitals Charitable Foundation)
(Registered Charity no 1075308)

If you are a taxpayer you can increase the value of your donation to the charity at no extra cost by completing this form. Currently, for every £1 you give, the charity can claim 25p from the Inland Revenue.

DETAILS OF DONOR

Title: _____ Forname(s): _____

Surname: _____

Home Address: _____

_____ Post Code: _____

I donate £_____ for the general charitable purposes of Yorkshire Cancer Centre (Leeds Teaching Hospitals Charitable Foundation, and without imposing a condition request that this donation be used for the purpose of:

YORKSHIRE CANCER CENTRE APPEAL (5605)

I wish the charity to treat all donations I make from the date of this declaration as Gift Aid donations, until I notify you otherwise

Signature: _____

Date: _____

N.B. Please remember to notify us if you no longer pay an amount of income tax/capital gains tax equal to the tax that we reclaim on your donation.

DATA PROTECTION: Yorkshire Cancer Centre will not pass your contact details to other organisations. If you do not wish to be added to our mailing list to receive news and updates, please tick in the box.

No thank you

Please return the completed form to:
Fundraising Department, Yorkshire Cancer Centre Appeal, Level 7, Bexley Wing, St James's Institute of Oncology, Beckett Street, Leeds. LS9 7TF.

For additional information please telephone 0113 2068444.