**RISE Theatre CIC Gift Aid Declaration (Charity No: 277425)**

Thank you for supporting the **RISE Theatre CIC**

Please complete the relevant sections below as appropriate and return the form to:

CREW Trust, 59 Holmes Avenue, Hove, East Sussex, BN3 7LB

I want CREW Trust to treat this and all donations I have made, since 6 April 2012 and will make from this date, until I notify you otherwise, as Gift Aid Donations.

I confirm I am a UK taxpayer and I have paid enough Income/Capital Gains Tax (excluding Council Tax & VAT) in each tax year to cover this amount and all other charitable donations I have made (or will make). I understand the charity will reclaim 25p of tax on every £1 that I have given Tick

SIGNATURE: ............................................................................. DATE: ...........................................

Name: ........................................................................................... PHONE: ….....................................

Address: ………………….....................................................................................................................

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

Email address: .......................................................................................................... ……………………….

**ONE OFF DONATION £……………………………**Cash **or**
Cheque payable to **Crew Trust**  **or**

Bank Transfer a/c: **00005162** Sort Code: **40-52-40** Reference: **RISE Theatre CIC**

**Or**

**---------------------------------------------------------------------------------------** (This section will be destroyed after processing)

Please debit my MasterCard/Visa with the amount of £……………

CARD NO:
SEC CODE: (CVV)

EXPIRY DATE: NAME ON CARD...........................................

**REGULAR DONATIONS:**

To The Manager of ...............................................................................................................**Bank**

Address:.................................................................................................................................

.................................. Post Code.................................. Sort Code: .....- .....-..... **Standing Order** instruction to pay from my **account: ...............................**

the sum of **£...................** quoting the reference **RISE Theatre CIC**

every **month/quarter/year commencing ...../............./....... (date)** until I notify you otherwise or until **...../............./........ (date)**

**or Bank Transfer** to:CafCash Ltd. Kings Hill West Malling Kent ME19 4TA

a/c number**: 00005162** Sort Code: **40-52-40** Ref: **RISE Theatre CIC**

**(please advise** **glenda.galvin@yahoo.co.uk**of any Bank Transfer and send Gift Aid Declaration if applicable)