

# Friends of Davenport House

PLEASE COMPLETE APPROPRIATE SECTION (s) IN BLACK INK

## 1. APPLICATION TO BECOME, OR CONTINUE AS, A FRIEND OF DAVENPORT HOUSE

|           |                |            |            |  |
|-----------|----------------|------------|------------|--|
| Title     | First Name(s): |            | Last Name: |  |
| Address:  |                |            |            |  |
| Town/City |                | Post Code: | Tel No.    |  |
| Email:    |                | Date       | Signed     |  |

## 2. Gift Aid Declaration

Name of Charity: Friends of Davenport House,  
Registered Charity No:1184307

I wish the Friends of Davenport House to treat all donations I have made over the past 4 years and any donations I make from the date of this declaration until I notify you otherwise, as Gift Aid donations. I am a UK taxpayer 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.

Yes

No

Please notify the Friends of Davenport House if you want to cancel this declaration, change your name or home address or 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.

|            |  |         |  |       |  |
|------------|--|---------|--|-------|--|
| Full Name: |  | Signed: |  | Date: |  |
|------------|--|---------|--|-------|--|

## 3. Standing Order Form for Annual Donation

|                 |  |                 |  |           |  |
|-----------------|--|-----------------|--|-----------|--|
| To the Manager: |  | Address of Bank |  |           |  |
| From Name:      |  | Address         |  |           |  |
| Post Code       |  | Account No.     |  | Sort Code |  |

Please pay to Barclay's Bank for the credit of the Friends of Davenport House (Sort code 20-05-73, Account No. 23828182 on \_\_\_\_\_ and annually on the same date until further notice.

the sum of: £

In Words

This order supersedes any other order for the credit of Friends of Davenport House or for Davenport House PPG.

|         |  |       |  |   |
|---------|--|-------|--|---|
| Signed: |  | Date: |  | Reference This should be your house number plus your postcode |
|---------|--|-------|--|---|

There are three ways to return this form to us:

1. Mail it to Friends of Davenport House, c/o Davenport House Surgery, Bowers Way, Harpenden, AL5 4HX
2. Drop it into the black post box, marked "Patient Group" on the wall to the left of the reception desk in the surgery.
3. Give it to the Surgery Receptionist

**HOWEVER, until access to the Surgery returns to normal please return this form to the Treasurer, Friends of Davenport House, 1a Oakwood Drive, Harpenden, AL5 2LR**

*This information will be held on computer. The Friends of Davenport House complies with the GDPR and will not pass your details on to any third parties without your prior agreement. Our privacy policy can be found on [www.friendsdavenport.org.uk](http://www.friendsdavenport.org.uk)*