



Faculty of Public Health Donation Form

**FACULTY OF
PUBLIC HEALTH**

Title	First name or initial(s)	Surname
Full Home address		
Postcode		
Telephone	email	

I would like to make a donation to the Faculty of Public Health of £ _____

As a one-off gift Monthly Quarterly Annually

Please make cheques payable to *Faculty of Public Health*. To make your donation by credit/debit card please complete the following:

Please debit my VISA/Mastercard/Visa Debit/Debit MasterCard/Maestro/Electron/AmEx

Card number: ____ / ____ / ____ / ____ / ____

Start date: ____/____ Expiry date: ____/____ Issue number: _____ Security code: _____

Signature: _____ Date: _____

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Please treat the enclosed gift as a Gift Aid donation

I confirm I have paid or will pay an amount of Income Tax and/or Capital Gains Tax for the current tax year (6 April to 5 April) that is at least equal to the amount of tax that all the charities and Community Amateur Sports Clubs (CASCs) that I donate to will reclaim on my gifts for the current tax year. I understand that other taxes such as VAT and Council Tax do not qualify. I understand the charity will reclaim 25p of tax on every £1 that I have given

Please notify the Faculty 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 return this form to: **Fundraising, Faculty of Public Health, 4 St Andrews Place, London NW1 4LB**

The information you have provided will be stored by the Faculty of Public Health in accordance with the Data Protection Act 1998 and will not be passed on to third parties. Registered Charity Number: 263894