Confidential STANDING ORDER/GIFT AID FORM * delete as required



Thank you for your support – together we are making a difference to local people in real need Supporting Hope Centre's projects including Hope House, St Helens Foodbank, Baby Basics and Make Lunch Find out more at hopecentre.org.uk

Α.	Customer Deta	ils
Name	e & Title	
Addre	ess	
Telep	hone No	
B.	Organisation D	etails
Name	e: The Hope Centr	e – St Helens, Atherton Street, St. Helens WA10 2DT. Charity No. 1103903
Sort C	Code: 05 07 44	Account No: 70519542
C.	Bank / Building	Society Details
Name	e of Account Hold	er
Name	e of Bank/Building	Society
Full A	Address	
Αςςοι	unt Number	Sort Code
l wou	ld like to give:	£5 £10 £15 other each month
Pleas	e pay:	The Hope Centre (see Section B) at Yorkshire Bank (05-07-44) For the credit of Account No: 70519542 the amount stated above
Signa	ture	Date
Until	nencing on further notice, ing reference num	ber for office use only
D.	Gift Aid	
gifta		tax payer, the Inland Revenue will give us 25p for every £1 at no extra cost to you! to make it a Gift Aid Declaration.
I am a	a UK taxpayer and	would like you to reclaim tax on my gifts:
Signa	ture	Date
		his form to The Hope Centre, Atherton Street, St. Helens, Merseyside, WA10 2DT be used for the express use for setting up standing order and/or Gift Aid
		periodic updates of Hope Centre activities please tick if you would like to receiven unsubscribe at any time.[]
	al: date received: al GA Ref:	







