



WOMEN'S THERAPY CENTRE

35th Birthday Appeal

Please print and complete this form and return to:

Freepost NAT5600, Women's Therapy Centre, 10 Manor Gardens, London N7 6JS

Your details

Name	
Address	
Postcode	
Telephone	
Email	

Your gift

Please accept my donation of £ _____

I enclose my cheque/postal order payable to Women's Therapy Centre Registered Charity OR

Please debit my MasterCard/Visa/CAF CharityCard/Visa Debit/Maestro (delete as applicable)

Card Account no:

Expiry date: ____ / ____ Card issue no. (if applicable): 3 digit security code

Signature _____ Date: _____

Please accept our thanks for your gift. If you do not require an acknowledgement, please tick this box

Gift aid

I want the Women's Therapy Centre to treat all donations I have made for this tax year and since 6th April 2000 and all donations I make from the date of this declaration until I notify you otherwise, as Gift Aid donations.

If you are a UK taxpayer, you can increase the value of the donation made to us by signing the declaration below. By doing this we will be able to reclaim 25p for every £1 that you give.

I understand that I must pay an amount of Income Tax/Capital Gains Tax at least equal to the amount the Women's Therapy Centre reclaims on my donations in the appropriate tax year (currently 25p for each £1 donated).

Signed: _____ Dated: _____

Thank You