



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 6<sup>th</sup> 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**