EWELL CASTLE SCHOOL

DONATION FORM

1. Donation Focus

| I woul | ald like to contribute to [please tick appropriat | e box/s] | | |
|---|---|-------------------------------|--------------------------------|--|
| | Old Ewellian Sixth Form Student Bursaries | | | |
| | General Pupil Bursaries Capital Development/Building Development Fund | | | |
| | | | | |
| | Specific Departments/Subject Equipment | Needs [please state] | | |
| 2. Pleas | se Complete Section 3A or 3B | | | |
| 3 a | One-off donations | | | |
| | I enclose a cheque made payable to Ewell Castle School, for £ | | | |
| | I have made a bank transfer to the Beneficiary details below for £ | | | |
| Benefi | ficiary details: | · | | |
| Ewell | ll Castle School No 2 Account, Barclays Bank S | ort Code: 20-29-90 A | Account: 73775631 | |
| 3b | Regular Donations | | | |
| I woul | uld like to contribute a regular gift of: | | | |
| | £5 per month £10 per month £20 per month | | | |
| | Another amount per month [please state] £ | | | |
| I have set up a Standing Order/Updated by Standing Order to the Beneficiary details below | | | | |
| refere | enced DONATION | | | |
| Benefi | ficiary details: | | | |
| Ewell | ll Castle School No 2 Account, Barclays Bank S | ort Code: 20-29-90 A | Account: 73775631 | |
| Signat | ature | | Date | |
| Ü | | | | |
| 3. G | Gift Aid [for UK Tax payers] | | | |
| | Aid allows Ewell Castle School (registered cha | rity: 312079) to recla | aim tax back on your donation. | |
| | gift aiding you agree that you are a UK taxpay | • | • | |
| | or Capital Gains Tax than the amount of Gift | | | |
| | our responsibility to pay any difference. | I would like to Gif | • | |
| 4. D | Donor Contact Details [use block capita | ls] | | |
| | Forename or initial(s) Sur | _ | | |
| Full Home A | Address | | | |
| | Postco | de Co | untry | |
| Home Tel | Mobile | | | |
| Personal En | Email | | | |
| Signature | | Da | te | |
| PUBLICALLY | LY THANKING YOU FOR YOUR GIFT | | | |
| | Include my name on a donor list (Yes/No) | | name on a donor list (Yes/No) | |
| Please retui | urn your completed form to Carol Hernandez - Tel 0 | 20 8394 3578 at <u>oldewe</u> | ellians@ewellcastle.co.uk | |



