

DONATION FORM

1. Donation Focus

I would like to contribute to [please tick appropriate box/s]

- Old Ewellian Sixth Form Student Bursaries
 General Pupil Bursaries
 Capital Development/Building Development Fund
 Specific Departments/Subject Equipment Needs [please state] _____

2. Please Complete Section 3A or 3B

3a 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 £ _____

Beneficiary details: Ewell Castle School, Barclays Bank Sort Code: 20-29-90 Account: 30357960

3b Regular Donations

I would 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

referenced **DONATION**

Beneficiary details: Ewell Castle School, Barclays Bank Sort Code: 20-29-90 Account: 30357960

Signature _____ Date _____

3. Gift Aid [for UK Tax payers]

Gift Aid allows Ewell Castle School (registered charity: 312079) to reclaim tax back on your donation. By gift aiding you agree that you are a UK taxpayer and understand that if you pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all your donations in that tax year, it is your responsibility to pay any difference. I would like to Gift Aid my donation

4. Donor Contact Details [use block capitals]

Title Forename or initial(s) Surname.....

Full Home Address

..... Postcode..... Country.....

Home Tel Mobile.....

Personal Email.....

Signature Date

WOULD YOU LIKE YOUR GIFT TO BE ANONYMOUS?

- Include my name on a donor list Do not include my name on a donor list

Please return your completed form to Carol Hernandez - Tel 020 8394 3578 at oldewellians@ewellcastle.co.uk
The Alumni and Development Office, Ewell Castle School, Church Street, Ewell, Surrey, KT17 2AW