THE SHEFFIELD ROYAL SOCIETY for the BLIND



Instructions to your Bank or Building Society to pay by Direct Debit Please fill in the whole form using a ball point pen and send to:								
The Sheffield Royal Society for the Blind 5 Mappin Street	Originators Identification Number							
Sheffield S1 4DT	4	0	9	5	3	9		
Name of Account Holder(s)	Refe	rence	Numbe	er				
Bank/Building Society account number Bank/Building Society account number Branch Sort Code	Instructions to your Bank or Building Society Please pay The Sheffield Royal Society for the Blind Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with The Sheffield Royal Society for the Blind and, if so, details will be passed electronically to my Bank/Building Society.							
Name and full postal address of your Bank or Building Society To the Manager Bank/Building Society Address Postcode	Sigr	ature(s)					
Banks and Building Societies may not accept Direct Debit Instructions for some types of account								
This guarantee should be detached and retained by the Payer.								
The Direct Debit								
Gua			L					
 This Guarantee is offered by all Banks and Building Societies that take part in the Direct Debit Scheme. The efficiency and security of the Scheme is monitored and protected by tour own Bank or Building Society. 								
 If the amounts to be paid or the payment dates change The Sheffield Royal Society for the Blind will notify you 10 working days in advance of your account being debited or as otherwise agreed. 								
 If an error is made by The Sheffield Royal Society for the Blind or your Bank or Building Society, you are guaranteed a full and immediate refund from your branch of the amount paid. 								
You can cancel a Direct Debit at any time by writing to Please also send a copy of your letter to us	o your E	ank or	Buildin	g Socie	ety.			

Gift Aid Declaration

To: Sheffield Royal Society for the Blind (SRSB)

Please treat as Gift Aid donations all qualifying gifts of money made by me today, in the past 4 years and in the future.

I confirm I have paid or will pay an amount of Income Tax and/or Capital Gains Tax for each tax year (6 April to 5 April) that is at least equal to the amount of tax that all the charities or Community Amateur Sports Clubs (CASCs) that I donate to will reclaim on my gifts for that tax year. I understand that other taxes such as VAT and Council Tax do not qualify. I understand the charity will reclaim 25p of tax on every £1 that I give on or after 6 April 2008.

Donor's details:

Title:		
First name/initial(s):	 	
Surname:	 	
Full home address:	 	
Postcode:	 	
(Signature)	 (Date)	

Please notify SRSB if you:

Want to cancel this declaration, change your name or home address or no longer pay sufficient tax on your income and/or capital gains.

If you pay Income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your Self Assessment tax return or ask HM Revenue and Customs to adjust your tax code.