

**"We think a Balcarras education is invaluable"**

The information on this form will be **confidential**. Please return it via a form tutor.

|  |           |
|--|-----------|
| First Name:                                | Last Name |
| Full Address:                              |           |
| Name(s) of son(s)/daughter(s) at Balcarras |           |

Please treat all qualifying gifts of money as Gift Aid donations.

|        |   |                                 |                                 |                                  |  |
|--------|---|---------------------------------|---------------------------------|----------------------------------|--|
| Amount | £10.00 <input type="checkbox"/>             | £20.00 <input type="checkbox"/> | £50.00 <input type="checkbox"/> | £100.00 <input type="checkbox"/> | Other (Please specify amount) <input type="text"/> |
| Timing | Monthly <input checked="" type="checkbox"/> | Starting from ___ / ___ / ___   |                                 |                                  | To last years _____                                |

I would be interested in helping with a one off capital purchase please contact me

I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of gift aid claimed on all my donations in that tax year, it is my responsibility to pay the difference. I understand that other taxes such as VAT and Council Tax do not qualify. I understand the charity can reclaim 25p of tax on every £1 that I give on or after 6 April 2008.

|  |        |
|--|--------|
| I am / am not a taxpayer (please delete as applicable) | Signed |
|--|--------|

Unless you prefer to pay by cheque or cash, could you please complete your bank details in the Standing Order form and return to Balcarras School – we will do all the rest.  
MANY THANKS!

N.B. If you already contribute to the scheme, this new commitment will replace your previous one.

### STANDING ORDER MANDATE

|              |  |  |
|--------------|--|--|
| Please tick: | New Instruction <input type="checkbox"/> | Amend previous Standing Order <input type="checkbox"/> |
|--------------|--|--|

To (name of your bank) .....

Bank Address .....

Bank Sort Code: .....

Account No: .....

Account Name: .....

**BENEFICIARY DETAILS**

VIRGIN MONEY

05-03-64

66313729

BALCARRAS OPPORTUNITIES ACCOUNT

Beneficiary Ref: .....

(to be completed by the School)

**PAYMENT DETAILS**

|                                      |   |
|--------------------------------------|---|
| Amount of payment £                  | Date of first payment ___ / ___ / ___                                   |
| Amount in words                      | Frequency of payment MONTHLY  |
| Date of last payment ___ / ___ / ___ | or continue until further notice (please tick) <input type="checkbox"/> |

|                        |             |
|------------------------|-------------|
| <b>Payer signature</b> | <b>Date</b> |
|------------------------|-------------|

|   |
|---|
| <b>Payer contact telephone number</b> (only in case of a query about this form) |
|---|