Dentaid
The Dental
Charity

Registered Charity N° 1075826

STANDING ORDER FORM

Please do not send this form to the bank. It must be returned to Dentaid at the address below. We will not share any of this information with third party organisations.

STANDING ORDER MANDATE	
Name and Address of bank / building society	To: The Manager
Postcode:	
Account name:	
My sort code:	
My account number:	
My home address:	
Postcode:	

PAYMENT DETAILS													
Please pay the sum of:	£					On the				(date)		of each month	
Beginning:	M	M		Y	Y	Y	Y	and each month thereafter					
Until:	D	D		M	M		Y	Y	Y	Y	Or	Until further notice	Please delete as appropriate

TO THE CREDIT OF:			
Account Name:	**DENTAID LTD**	Bank:	Lloyds
Sort Code::	30 99 50	Account number:	47988060
Quoting reference:			(your surname)

Gift Aid Declaration

If you are a UK tax payer, you can boost your donation by 25p for every £1 you donate.

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making donations go further

☐ By ticking this box I confirm that

- I am a UK taxpayer. Please treat all donations I make or have made to Dentaid for the past 4 years as Gift Aid donations until I notify you otherwise.
- I 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 any difference.

Please contact us if you want to cancel or amend this declaration, if you no longer pay sufficient Income Tax and/or Capital Gains Tax, or if your address changes.

Signature:		**Date:**	

116 Commercial Road, Totton, Hants SO40 3AD www.dentaid.org

Registered with FUNDRAISING REGULATOR