I would like to give a monthly donation to help people facing pregnancy or pregnancy loss



First Name / Last I	vame		Postcode					
Address line 1			Tel/Mobile Num	ber				
Town / City			Email					
I/we would like to make a monthly/quarterly/yearly gift of (circle one):								
£5 £10	£25	Other						
I would like my payments to be taken from my account on the [1st / 15th] of each month. The start of your payments will be at least 1 month from today, (circle one).								
Please fill in this form and send it to: Julia Young, Life, 4 Jephson Court, Tancred Close, Leamington Spa, CV31 3RZ								
Bank/Building Soc	iety Name		Sort Code					
Address line 1			Account Numbe	r				
Name of Assessed	Halden							
Name of Account	Holder							
Service User Num	her 699715							
Instructions to your Bank/Building Society: Please pay Life 2009 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 Life 2009 and, if so, details will be passed electronically to my Bank/Building Society								
Signature(s)				Date				

Direct Debit Guarantee Payer – please retain this section for your records

This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits. • If there are any changes to the amount, date or frequency of your Direct Debit, Life will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request Life to collect a payment, confirmation of the amount and date will be given to you at the time of the request. • If an error is made in the payment of your Direct Debit by Life or your bank or building society you are entitled to a full and immediate refund of the amount paid from your bank or building society. • If you receive a refund you are not entitled to, you must pay it back when Life asks you to. • You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.

Gift Aid/Keep in touch



*If you are a UK taxpayer, please tick the box below to join the Gift Aid scheme. Doing so will mean that we can claim up to 25p extra for every £1 you give, at no additional cost to you!
Yes, I am a UK taxpayer. Please treat all donations I make or have made to Life for the past 4 years as Gift Aid donations until further notice. I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax the amount of Gift Aid claimed on all my donations to charities and Community amateur sports clubs (CASCs) in that tax year, it is my responsibility to pay any difference. Life will claim 25p on every £1 donated. Please let us know if you want to cancel the declaration, change your name and/or address or no longer pay sufficient tax on your income and/or capital gains.
Date

Keep in touch

By post:	By email:				By pho	ne:		
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We take your privacy seriously and will never sell or swap your details with third parties. You can withdraw your consent to be contacted at any time by emailing GDPR@lifecharity.org.uk. Information about how we protect and use your personal data is set out in our privacy policy: lifecharity.org.uk/privacy

Please return this donation form (minus the Direct Debit guarantee at the bottom) to the address below:

Julia Young
Life
4 Jephson Court
Tancred Close
Leamington Spa
CV31 3RZ

Thank you for your support!



