

Thank you for your ongoing support

Please fill in this form clearly in ball point pen

I would like to make a regular gift of:£5	£10 _ £20 _ d	other £		.mor	nthly/	quai	terl	y/an	nua	lly (c	ircle) st	arting	, 4 /.	/	2014
Title: Forename:	Surname	Address														
		Postcode														
Email address	Telephone															
By providing your email and/or telephone details you any time by contacting us at the address below.	ı are agreeing for Willow to	o contact y	ou in th	ne futu	re with	upda	tes oi	n our	work	and a	ctivit	ties.	You c	an ch	ange i	this at
giftaid it Please treat all gifts declaration to Willow Fo Gains Tax for each Tax Year (6 April to 5 Apr (CASCs) that I donate to will reclaim on my gunderstand the charity will reclaim 25p on ever	il) that is at least equal fts for that Tax Year. I	nations. I	l confii nount c	m I h	ave p that a	aid o	· will char	pay i	an ar or C	moun ommi	t of unity	Inco	ome 1 nateu	ax or r Spc	r Cap orts C	ital Ilubs
Your details will be held on our database in accorda activities. By providing us with your details you are a																
Instruction to your bank or b	ouilding society	y to p	ay b	y D	irec	t D	ebi	t	•	7	7	P	RE	ÇŢ		
Please fill in the whole form including officiall point pen and send it to:	cial use box using a	Servi	ce use	r nui	mber				•	•	•	D	eb	ıt		
Willow Foundation		6	9	(3	7	8		8							
Willow Foundation Willow House		Referen	ice		ı					_						
18 Salisbury Square																
Old Hatfield														Ш		
Herts																
AL9 5BE					/ILLOW art of the								v			
			11110	o not p	art 01 till	J 111001 0	00011	o you	Dank	or build	iiig o	Joolot				
Name(s) of account holder(s)																
Bank/building society account number																
		Instruction to your bank or building society Please pay Willow Foundation Direct Debits from the account detailed in														
Branch sort code		this Inst												ın		
		Guarantee. I understand that this Instruction may remain with Willow Foundation and, if so, details will be passed electronically to my														
Name and full postal address of your bank or bu	ildina society	Foundat bank/bu				ls will	be pa	ssed	elect	ronica	lly to	o my				
To: The Manager	Bank/building society	barnoba	manig o	ooloty	•											
Address		Signatur	re(s)													
Postcode		Date														
Banks and building so	cieties may not accept Dir	rect Debit I	nstructi	ons fo	or some	type:	of a	ccour	ıt						1	

This guarantee should be detached and retained by the payer.

The Direct Debit Guarantee



- 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 Willow Foundation will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request Willow Foundation to collect a payment, confirmation of the amount and date will be given to you at the time of the request
- of the refuse of the request of the request of the request of the reputs of the refuse of the reputs of the refuse of the reputs of the refuse of the refuse
- Willow Foundation 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.

DDI3