

CAF AND TRANSNATIONAL GIVING EUROPE

Gift Request form

If you have any questions when completing this form, contact a member of our Customer Service team on 03000 123 000 or email tge@cafonline.org

Telephone calls may be monitored/recorded for training purposes.

Data protection and privacy

We take data protection and privacy very seriously. Our Privacy Notice at www.cafonline.org/privacy governs the way in which we collect, retain and use personal data. We shall ensure that we only hold personal data for as long as it is needed and that it is held securely.

Identification details

In order for CAF to comply with UK anti-money laundering regulations, we are required to complete checks on those involved in using the Services before this application can be accepted.

Wherever possible these checks are performed electronically. In certain circumstances, however, it may be necessary to request additional identification documentation to satisfy our requirements under the regulations.

Donor(s) Information

First name

Last name

Date of birth

Residential address

Postcode

Telephone

Email address

Gift Information

Donation amount ☐ GBP ☐ USD ☐ EUR

Please advise if you wish to remain anonymous ☐ Yes ☐ No

Please give details below of the purpose of the donation. i.e. A specific project or general support of the charities objectives

Beneficiary Information

Name of organisation

Address

Postcode

Telephone:

Contact name and title

Contact's email address

To reclaim Gift Aid, you, the Donor, must be the account holder for the method of payment.

Please advise if you have a connection to the charity. i.e. Trustee or other link

☐ Yes ☐ No

If you have answered Yes to the question above please give details below

In order to Gift Aid your donation to Charities Aid Foundation you must tick the box(es) that apply

- ☐ Please Gift Aid any donations I make now and in the future
☐ Please Gift Aid any donations I have made in the past four years

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 being claimed on all my donations in that tax year, it is my responsibility to pay any difference.

Please notify us if you want to cancel this declaration, change your name or home address or if you no longer pay sufficient tax on your income and/or capital gains.

Signature

Date: dd/mm/yyyy

CAF and the companies in which it has a majority stake, or their subsidiaries (defined here as the Group) will not share your information with any outside organisation except as part of providing a product/service or when legally obliged to do so.

By signing this Gift Request form, I confirm that:

- I agree with the terms as set out in this form
- the information given in this application is accurate

I hereby request CAF to consider and approve the donation I would like to make to the organisation specified in this form.

I understand that, where a Gift Aid declaration has been submitted, Gift Aid will be claimed from HM Revenue & Customs and added to the principal donation amount.

Signature

dd/mm/yy

Please make copies of this form as appropriate.

Please send the completed form(s) to **tge@cafonline.org**. You will then receive an email confirmation once CAF has accepted your request. No binding agreement shall exist until CAF sends the Customer email confirmation of the acceptance of the request.