Donation

Together we can help the people of Yorkshire avoid, survive and cope with cancer.

yorkshire cancer research

About You

Title _____ First name or initial(s) _____ Surname _____

Organisation (if applicable) _____

Address _____

Postcode _____ Telephone _____ (home/work/mobile)

Email _____

Reason for Donation: _____

Data Protection: We really value your support. We'd like to keep you up to date on the progress you are helping us make, to thank you for your support and let you know about the different ways you can help us in the future. We will always store your data confidentially and securely. Your data will be used for administration, analysis and research purposes. It will not be sold to a third party. For information on how we store and use data, please refer to our privacy policy at: **ycr.org.uk/privacy**
Please let us know the ways in which you would like us to keep in touch. Tick the appropriate boxes below.

Telephone ☐ Yes ☐ No **Post** ☐ Yes ☐ No **Email** ☐ Yes ☐ No **SMS on my mobile** ☐ Yes ☐ No

Donation Amount

I would like to donate **£** _____ to: **Yorkshire Cancer Research**

giftaid it

Gift Aid allows UK charities to claim back the basic rate tax already paid on donations by the donor. This means we can claim back from the government on your behalf 25p for every £1 donated, boosting the value of the donation by 25%, at no extra cost to you.

☐ I want to Gift Aid my donation of **£** _____ to: **Yorkshire Cancer Research**

I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax in the current tax year than the amount of Gift Aid claimed on all my donations it is my responsibility to pay any difference.

Please notify the charity if you:
- want to cancel this declaration
- change your name or home address
- no longer pay sufficient tax on your income and/or capital gains

If you pay Income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your Self-Assessment tax return or ask HM Revenue and Customs to adjust your tax code.

Payment Method

Card Payment Please debit my card. Donation amount of **£** _____

Card Number ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐ (Shaded for Maestro Only)

Expiry date ☐☐ / ☐☐ **Valid from** ☐☐ / ☐☐ **Issue no.** ☐☐

Signature _____ **Date** / /

Bank Transfer:
Yorkshire Cancer Research
Lloyds Bank
Sort code: 30-00-05
Account: 00005049

Cheque:
Please make cheques payable to **Yorkshire Cancer Research**

Important:
If you are paying in sponsorship money please enclose sponsorship forms so we can claim Gift Aid as appropriate.

Thank you for your support!

Please return this form to: **Yorkshire Cancer Research, Jacob Smith House, 7 Grove Park Court, Harrogate HG1 4DP**