

Every day Age Cymru touches the lives of thousands of older people across Wales.



Your gift really makes a difference.

Thank you for supporting us.

## Standing Order Form

**Title:** \_\_\_\_\_

**First name:** \_\_\_\_\_

**Last name:** \_\_\_\_\_

**Home address:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Postcode:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

### Your kind donation could be worth even more...

Use Gift Aid and you can increase your donation by 25% at no extra cost to you!

*giftaid it*

This means that £25.00 can be turned into £31.25, as long as donations are made through Gift Aid – and it doesn't cost you a thing. Simply complete this form, tick the relevant box and return to: Donations Team, Age Cymru, Tŷ John Pathy, 13/14 Neptune Court, Vanguard Way, Cardiff, CF24 5PJ.

**Yes**, I want Age Cymru to treat all donations I have made for the four years prior to this year, and all donations I make from the date of this declaration until I notify you otherwise, as Gift Aid donations. I confirm I pay an amount of income tax and/or capital gains tax at least equal to the tax that the charity will reclaim on my donations in the tax year.  
Date \_\_\_/\_\_\_/\_\_\_ (please complete)

**No**, I am not a tax payer.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## Can we keep in touch?

We would like to hold your details to keep you updated about our activities. Your details will not be passed onto any other parties without your prior permission. Please indicate whether or not you wish to have your details held by circling the appropriate phrase:

I consent       I do not consent

## Your gift:

To the Manager (Bank Name) \_\_\_\_\_

Full Bank address \_\_\_\_\_

Bank Postcode: \_\_\_\_\_

Name of Account holder: \_\_\_\_\_

Account No: \_\_\_\_\_ Sort Code: \_\_\_\_\_

Please pay, until further notice: Age Cymru, Natwest Bank, Park Place, Cardiff, Sort Code 01-01-55 Account No. 17604184 the following amount.

I would like to help Age Cymru with a Standing Order of:

£5 a month                       £10 a month                       £25 a month

Or my own preferred amount of £\_\_\_\_\_ every month/quarter/year (Delete as appropriate)

Starting on ..... (day) of ..... (month) 2011 (please complete).

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Tŷ John Pathy  
13/14 Cwrt Neptune  
Ffordd Blaen y Gad  
Caerdydd CF24 5PJ

Tŷ John Pathy  
13/14 Neptune Court  
Vanguard Way  
Cardiff CF24 5PJ

ff/t 029 2043 1555  
ff/f 029 2047 1418  
e/e enquiries@agecymru.org.uk  
www.agecymru.org.uk

