

# LiNX Christian Youth Trust – Gift Aid Form



Please treat as Gift Aid donations all qualifying gifts of money made, (please tick all boxes you wish to apply). Or tick here for **no** Gift Aid.

<input type="checkbox"/>	Today
<input type="checkbox"/>	in the past 4 years
<input type="checkbox"/>	in the future

*giftaid it*

I confirm I have paid or will pay an amount of Income Tax and/or Capital Gains Tax for each tax year (6 April to 5 April) that is at least equal to the amount of tax that all the charities or Community Amateur Sports Clubs (CASCs) that I donate to will reclaim on my gifts for that tax year. I understand that other taxes such as VAT and Council Tax do not qualify. I understand the charity will reclaim 25p of tax on every £1 that I give on or after 6 April 2015.

<b>Donor Details:</b>	Email:		
Title:	First name or initial(s):		
Surname:			
Full home address:			
		Postcode:	
Date:	Phone:	Church connection:	
Signature:			

**Please notify the charity or CASC 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.*

I enclose a gift of £..... **OR**  I would like to donate £7.60 per month  
(Please make cheques payable to 'LiNX Christian Youth Trust').

<p><b><u>Monthly Standing Order Form</u></b></p> <p>Please pay LiNX the sum of £ <u>£7.60</u></p> <p>In words <u>Seven Pounds sixty pence</u></p> <p>Every Month starting on _____</p> <p><b><u>Your Bank Account Details:</u></b></p> <p>Bank Account number _____</p> <p>Bank Sort code _____</p> <p>Bank Name _____</p> <p>Bank Address _____</p> <p><b>Signature:</b> _____</p> <p><b>Date:</b> _____</p>	<p><b><u>Your Details</u></b> (PLEASE USE BLOCK CAPITALS)</p> <p><b>Title:</b> Mr/Mrs/Miss/Ms/Rev/Dr/ Other.....</p> <p><b>First Name</b> _____</p> <p><b>Surname</b> _____</p> <p><b>Address</b> _____</p> <p>_____</p> <p style="text-align: center;"><b>Postcode</b></p> <p>_____</p> <p>For Office Use. Our ref.....</p> <div style="border: 1px solid black; padding: 5px; font-size: small;"> <p>Bank: HSBC 14 Fore St. St Marychurch, Torquay TQ1 4ND Sort Code: 40-44-43 Account No: 41129775 Account Name: LiNX Christian Youth Trust</p> </div>
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Please complete and return to:  
**LiNX Christian Youth Trust, 1a Clifton Road, Paignton, Devon, TQ3 3LN**