



Please *help their children smile* by making a donation now.

DONATIONS / CREDIT CARD DONATIONS

FULL NAME _____
(as it appears on your credit card)

HOME ADDRESS _____

POST CODE _____

PHONE _____

EMAIL _____

CHEQUE / POSTAL DETAILS

I enclose a cheque/postal order made payable to 'Scotty's Little Soldiers' for:
£ _____

CREDIT CARD DETAILS

Please debit my: Visa Mastercard Maestro

Card Number _____

Start Date _____ Expiry date _____

Security Number _____

Maestro Issue No _____

Donation amount £ _____

Gift Aid it

I want the charity to treat all donations I make from the date of this declaration until I notify you otherwise, as Gift Aid donations.

Please note that you must pay an amount of Income Tax and or Capital Gains Tax at least equal to the tax that Scotty's Little Soldiers claims on your donations in the appropriate tax year (currently 28p for each £1 you give).

Signature _____

Scotty's Little Soldiers will not pass on your details to other organisations but would like to inform you of forthcoming activities, events and news. If you prefer not to receive this information please tick this box

BANKERS ORDER FORM (for regular giving)

BANK / BUILDING SOCIETY NAME _____

BANK ADDRESS _____

POST CODE _____

SORT CODE _____

Please make for _____ years, or until further notice, payments debiting my account with the following:

MY ACCOUNT NO. _____

AMOUNT £ _____

Frequency of payments:

Yearly Quarterly Monthly
(how often you wish to make payments)

DATE OF FIRST PAYMENT _____

NAME _____

ADDRESS _____

POST CODE _____

TELEPHONE _____

SIGNATURE _____

DATE _____

PAYMENT MADE TO:

Branch: HSBC, Salisbury

Sort Code: 40-40-14

Account: Scotty's Little Soldiers:

Account Number: 62055007

Please return to:

Scotty's Little Soldiers, PO Box 202, Wisbech, PE14 4DJ