

**Family Counselling Trust
- Dorset**

Application to become a Friend

Please enrol me as a Friend of the Trust

Title (Mr/Mrs/Miss/Ms/Other).....

Surname

Forenames

Address.....

.....

Postcode.....

Telephone

Email.....

1. I wish to pay the following: -

Annual subscription (£30)

Life membership (£300)

Donation.....

Total.....

Please tick one or more of the following, as appropriate:-

I enclose cash/cheque for £.....

I would like to pay annual subscriptions by Banker's Standing Order, and have completed the form alongside.

Please send me more information about the Trust.

Signed

Date.....

2. I wish to help in other ways as a FCT friend (volunteering, fundraising etc)

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**Family Counselling Trust
Charity No. 1112739**

Gift Aid Declaration

If you are a taxpayer and eligible to Gift Aid your donation, please complete the form below. This will increase your gift by 25p for every £1 given (at current rate), at no extra cost to you or us.

Details of Donor:

Title (Mr/Mrs/Miss/Ms/Other)

.....

Surname.....

Forenames

.....

Address.....

.....

.....

Postcode.....

I want the above named charity to treat the donation of £..... that I made on..... and all subsequent donations I have made since then, or, until further notice, will make, as Gift Aid donations.

Signed.....

Date.....

Notes to donor:

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

If your circumstances change and you no longer pay sufficient tax to cover the tax which the charity reclaims on your donation, you need to cancel your declaration.

In any event you can cancel your declaration at any time for whatever reason you wish by notifying the charity.

If you pay tax at the higher rate you can claim relief at the higher rate element on your Gift Aid donations.

**Please post form to FCT
Nethergrove House,
Portesham,
DORSET, DT3 4ES**

Banker's Standing Order Form

Bank

.....

.....

Address

.....

.....

.....

Postcode.....

Please pay Lloyds TSB Bank plc, 1 High West Street, Dorchester, Dorset DT1 1UG (sort code 30 - 92 - 69) for the credit of Family Counselling Trust, Account No.01309282, the sum of

£..... on receipt of this form, and thereafter on 1st October annually.

Surname.....

Forenames

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Address.....

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.....

.....

Postcode.....

Bank account

no.....

Signed.....

Date.....