



Standing Order Form

the rainbow centre

supporting people who are homeless, vulnerable or in crisis

To: Bank name:

Bank address:

Account holder details:

Title: First Name: Surname:

Address:

..... Postcode:

Telephone: Email:

Account number:

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Sort code:

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My gift:

Please pay the sum of: £.....

to **ST MARY'S SOCIAL ACTION CENTRE**

CAF Bank Ltd. Sort Code: 40-52-40 Account no: 00081227

Monthly / Bi-Annually / Annually (please delete as appropriate) **until further notice.**

☐ **Yes, please Gift Aid my donation**

Make your gift worth 25% at no cost to you

Yes, I want The Rainbow Centre to treat all donations I have made for the four years prior to this year, & 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 UK income tax and/or capital gains tax to cover the amount that all charities and Community Amateur Sports Clubs will reclaim on my donations in the tax year. I understand that other taxes such as VAT and Council Tax do not qualify. I understand the charity will reclaim 28p of tax on every £1 that I gave up to 5th April 2008 and will reclaim 25p of tax on every £1 that I give on or after

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Please return this form to:

The Rainbow Centre, Parish House

Castle Road, Scarborough, YO11 1TH

T: 01723 500663 **E:** fundraising@therainbowcentre.org **W:** www.therainbowcentre.org

We would love to keep you updated on our work and the services we offer. If you would rather we did not keep in touch by post and/or email, please contact us to let us know.

We will NEVER share your details with a third party.

Tick this box if you would rather NOT be contacted by telephone: ☐

Registered Charity No: 1183490