

British Dental Association Trust Fund Gift Aid Declaration

Title	Forename(s)	Surname
Address		
Postcode		
I want the cha	ırity to treat	
* the enclosed	donation of £ as a Gift A	Aid donation
* the donation	(s) of £ which I made on/	/ as (a) Gift Aid Donation (s)
* all donations Gift Aid donat		laration until I notify you otherwise as
	I have made for the six years prior to s declaration until I notify you otherw	this year, and all donations I make from ise, as Gift Aid donations.
* please delete	e as appropriate	
		pital Gains Tax at least equal to the tax propriate tax year. (currently 25p for each
Please make a	ll cheques payable to the British Dent	al Association Trust Fund
	ou can send your donation via bank to he Trust Fund's account:	ransfer (putting your name as the
		Please turn over

Sort code:

Account Number:

Account Name: BDA Trust Fund

30-90-72

00997688

If you pay us by	y BACS, please send in this form so we can claim the Gift Aid.
Signed	
Date	

Notes

- The BDA can reclaim 25p of tax on every £1 you give.
- If you pay income tax at the higher rate, you must include all your Gift Aid donations on your Self Assessment tax return if you want to receive the additional tax relief due to you.
- You can cancel this Declaration at any time by notifying the BDA.
- If in the future your circumstances change and you no longer pay tax on your income and capital gains equal to the tax that the charity reclaims, you can cancel your declaration.
- If you are unsure whether your donations qualify for Gift Aid tax relief, ask the BDA. Or, refer to help on the HMRC website (www.hmrc.gov.uk)
- Please notify the BDA if you change your name or address.

Please return this form to Bina Varkey, Finance Manager, British Dental Association, 64 Wimpole Street, London, W1G 8YS. If you have any questions about this form, please email finance@bda.org