

You can support the work of Beyond Cancer by giving a regular or one-off donation. Please complete and return this form to: **Beyond Cancer**, **P.O. Box 463**, **Leeds LS17 1HQ**

I would like to give a regular donation to Beyond Cancer

Amount:	□ £5 □ £10 □ £15 □ £20 □ Other
Frequency	Monthly starting from / /
Your Details	
Title: Mr/Ms/I	Miss/Mrs/Dr
Full Name:	
Address:	
Postcode:	
Your Bank D	<u>etails</u>
To the Manag	jer of:
Full Address:	
Postcode:	
Until further	notice please debit my account:
Sort Code:	□ Account no: □ □ □ □ □ □ □ □ □ □
Please pay:	Beyond Cancer, Yorkshire Bank, 53 Harrogate Road, Chapel Allerton, Leeds LS7 3PY
	Bank Sort Code: 05-00-40 Account number: 10035378
	Please 'Gift Aid' your donation
giftaidit	I would like Beyond Cancer to treat all donations made by me and all those I make from the date of this declaration, as Gift Aid donations, until I notify otherwise. I confirm that I pay UK income tax and/or capital gains tax and the amount of tax I pay exceeds the amount I would like Beyond Cancer to claim. You must pay an amount of Income Tax and/or Capital Gains Tax for each tax year (6 April one year to 5 April the next) that is at least equal to the amount of tax that Beyond Cancer will reclaim on your gifts for that tax year.
	Please notify Beyond Cancer if you wish to cancel this declaration, change your name or home address, or no longer pay sufficient tax on your income and/or capital gains.
	Signature

Print Name Date /