

Donation form

Please email your completed form to fundraising@avma.org.uk

or post to Action against Medical Accidents, Freedman House, Christopher Wren Yard, 117 High Street, Croydon CR0 1QG.

Your details

Title First name (in full) Last name

Full home address
and postcode

Phone Email

Are you happy for us to email you information about our work and how you can help us? Yes No
You can unsubscribe at any time.

Privacy notice: The information we send you may include a newsletter to tell you more about the work we do and information about how you can help us including occasional emails about our conferences, events or fundraising. We will always store your personal details securely. To view our privacy notice please visit www.avma.org.uk/privacy

I would like to make a one-off donation to AvMA

£50 £100 £250 £500 £1,000 Other (please specify)

Payment method

BACS payment Co-operative Bank | Payee: Action Against Medical Accidents | Sort Code: 08-92-99 | Account: 65583630
IBAN No: GB66 CPBK 0892 9965 5836 30 | SWIFTBIC No: CPBK GB22

Online payment You can donate online at www.avma.org.uk/donate

Cheque payment Please only donate by cheque if you are not able to use our other methods.
Cheques should be payable to Action Against Medical Accidents

I would like to become a Friend of AvMA and make a regular donation by standing order

£5 £10 £25 £50 £100 Other (please specify)

Each: Month Quarter Year Starting on (date) until further notice

Instruction to your bank or building society You can amend or cancel this standing order at any time by contacting your bank.

Bank name

Branch address
and postcode

Please pay: Co-operative Bank plc, Delf House, Southway, Skelmersdale WN8 6NY
Payee: Action against Medical Accidents Sort code: 08-92-99 Account number: 65583630

Name of account holder to be debited

Account number Sort code

Signature Date

Boost your donation by 25p of Gift Aid for every £1 you donate

Gift Aid is reclaimed by AvMA from the tax you pay for the current tax year.
Your **home** address is needed to identify you as a current UK taxpayer.

In order to Gift Aid your donation you MUST tick the box below:

I want to Gift Aid my donation of _____ and any donations I make in the future or have made in the past
four years to Action against Medical Accidents (AvMA)

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 tax year it is my responsibility to pay any difference.

Please notify AvMA if you:

- want to cancel this declaration
- change your name or home address
- no longer pay sufficient tax on your income and/or capital gains

If you pay Income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your Self-Assessment tax return or ask HM Revenue and Customs to adjust your tax code.

I confirm I do NOT wish to Gift Aid my donation

Registered charity in England & Wales (299123) and Scotland (SCO39683)

giftaid it