



GIFT AID FORM

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Registered Charity 1018491

I / We would like to make a donation to SOMERVALE SCHOOL PTA using Gift Aid.

My / Our details are:

First Name:

Surname:

Address:

.....

Postcode:

Student's Tutor Group: / N/A

I / we would like to Gift Aid the enclosed donation of £ ...

Any future donations I / we make to SOMERVALE SCHOOL PTA I / we would like to Gift Aid them until I / we notify you otherwise.

Signature(s):

Date:

To qualify for Gift Aid, what you pay in income tax or capital gains tax must be at least equal to the amount the charity will claim back in the tax year.

Return to: SOMERVALE SCHOOL PTA, c/o Somervale School, Redfield Road, Midsomer Norton, BA3 2JD.

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