



## Standing Order Form

### Bank Details

To the manager of .....bank  
Bank address .....  
.....Postcode.....

I would like to make a regular donation to Women + Health. Please pay Women + Health, Account number 00016311, Sort code 40-52-40, at CAF BANK Ltd, 25 Kings Hill Avenue, Kings Hill, West Malling, Kent ME19 4JQ on the .....day of ..... 20..... and then every succeeding month/ quarter/year until further notice the sum of £.....

### Payee Details

Ms/Miss/Mr/Mrs/Other..... First Name(s) .....

Surname.....

Address.....

..... Postcode.....

Telephone..... Email .....

Account number ..... Sort Code .....

Signature ..... Date .....

If you would like Women + Health to reclaim the tax on your donation, increasing the value of your gift by over a quarter and at no extra cost to you, please fill in the Gift Aid declaration below.

### Gift Aid Declaration

I wish Women + Health to treat all donations that I made during the previous six years and all future donations as Gift Aid donations, until I notify you otherwise.

Signature.....Date.....

NB: You must be a UK taxpayer and expect to pay at least as much income tax and/or capital gains tax this year as Women + Health (W+H) will reclaim on your donation. If future circumstances change and you no longer pay tax on your income and/or capital gains equal to the tax the W + H reclaims, you can cancel the declaration. If you pay tax at the higher rate, you can claim further tax relief in your self-assessment tax return.

Please contact your local tax office for leaflet IR113 'Gift Aid' or visit [www.hmrc.gov.uk](http://www.hmrc.gov.uk) for further information.

**Please return this form to  
Women + Health, 4 Carol Street, London NW1 0HU**

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