



**Donation Form**

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| Title:  |  |
| First Name(s): |  |
| Family Name:  |  |
| Postal address: |  |
| Email address: |  |

If you have a particular cause that you would like your donation to go to, please let us know in the box below:

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| One-off donation amount: £ |

[ ]  If you would like to be contacted about setting up a regular gift, please tick this box.

[ ]  Please send me email updates about the work of YMCA Essex.



If I have ticked the Gift Aid box below, I confirm that I am a UK tax payer. I want YMCA Essex to reclaim tax on the donation detailed here, given on the date shown. I understand that if I pay less Income Tax and/or Capital Gains Tax in the current tax year than the amount of Gift Aid claimed on all my donations it is my responsibility to pay any difference. I understand that YMCA Essex will reclaim 25p of tax on every £1 that I have given.

[ ]  

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| --- | --- | --- | --- |
|  Signed: |  | Dated: |  |

Once completed, please send your donation with this form to:

YMCA Essex

Victoria Road

Chelmsford

CM1 1NZ

Thank you. Your support is very much appreciated. Registered charity: 1054070