Please complete using School reception.	BLOCK CAPITALS,	return u	sing the	pre-paid envelope pr	rovided c	r by hand to M	lonmouth
Name:							
Title:			F	lonours:			
Address:							
Postcode:							
Telephone							
Email							
l am a:							
Former Pupil Governor	Former Parent Friend	_ _		Staff Member Staff Member	_ _	Current Parer Former Gove	-
I would like my gift	to be allocated to an) <i>:</i>					
Assisted Place bursary (Headmaster's choice)							
Assisted Place bursary (music)							
With a sporting preference for							
We will guarantee that your gift will be allocated into one of the four areas listed and will endeavour to channel a sports award to the sport of your choice.							
I am a UK Tax payer and would like Monmouth Schools' Charitable Trust to treat this and all future donations I make to the Charity, as Gift Aid donations. I note I must have paid an amount of income tax or capital gains tax that at least equals the tax reclaimed on this donation							
Signatu <u>re</u>					Date		

Please return your completed form to:

Mrs Clare Anning, Development Director, Monmouth Schools' Charitable Trust, Monmouth School, Almshouse Street, Monmouth NP25 3XP Tel: 01600 713143 Fax: 01600 772701 development@monmouthschool.org

I would like to support an Assisted Bursary Place by making a donation of \pounds PAYMENT METHODS I would like to pay by cheque I would like to pay by BACS transfer Lloyds Bank Sort Code xx xx xx Account: xxxxxxxx Mastercard D Visa D Visa Debit D Switch D I would like to pay by credit/debit card Card Number: Valid From Expiry Date Issue No. Instruction to your Bank or Building 8 3 0 9 4 8 Originator's Identification Number Society to pay by Direct Debit Please fill in the whole form using a ballpoint pen and send it The School Accountant, Monmouth Schools' Charitable Trust, Almshouse Street, Monmouth, NP25 3XP Reference Number: I would like to make a regular donation of \pounds I would like to set-up a Direct Debit Name of your Bank/Building Society _____ To the Manager Address _____ Postcode -Branch Sort Code Account Number Please make the payment on the 1st of month / year annually 🔲 quarterly \(\Pi \) monthly \(\Pi \) And then, the amount \pounds

Please pay Monmouth Schools' Charitable Trust direct debit from the account detailed in this instruction subject to the safeguards
assured by the Direct Debit guarantee. I understand that this instruction may remain with Monmouth Schools' Charitable Trust and
details passed electronically to my Bank/Building Society.

• The amount above is to be taken from my account, annually, quarterly or monthly as indicated, until I instruct you otherwise.

This Guarantee should be detached and retained by the payer.

The Direct Debit Guarantee

- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits
- If there are any changes to the amount, date or frequency of your Direct Debit Monmouth Schools' Charitable Trust will notify you 14 working days in advance of your account being debited or as otherwise agreed. If you request Monmouth Schools' Charitable Trust to collect a payment, confirmation of the amount and date will be given to you at the time of the request
- If an error is made in the payment of your Direct Debit, by Monmouth Schools' Charitable Trust or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society If you receive a refund you are not entitled to, you must pay it back when Monmouth Schools' Charitable Trust asks you to.
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.