

# Donation and Gift Aid form

1. Name .....

Address .....

.....

..... Postcode .....

Email .....

Telephone .....

2. I wish to donate £ .....

**I enclose my cheque/postal order payable to Kids Kidney Research**

*For every pound you donate, we could get an extra 25p from the Government if you are a UK taxpayer. If you would like us to claim Gift Aid on your donation please sign the declaration below. Your address will not be used for any purpose other than claiming Gift Aid.*

3. I confirm that I am a UK Income or Capital Gains Tax payer. I have read this statement and would like Kids Kidney Research to reclaim tax on my donation detailed above. I understand that if I pay less Income or Capital Gains Tax in the current tax year than the amount of Gift Aid claimed on all of my donations it is my responsibility to pay any difference. I understand that Kids Kidney Research will reclaim 25p of tax on every £1 that I have given.

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

4. Please return this donation form to:

**Kids Kidney Research**

**10 Beechwood, Southwater, Horsham, West Sussex RH13 9JU**

*Thank you for your support*

Registered Charity Number: 266630: Kids Kidney Research