

# Donation form



Please fill in your name and address

Title

Forename

Surname

Address

Postcode

Telephone

Email

The Muscular Dystrophy Campaign would like to keep you informed of the work we do.  
If you do **not** wish to receive information, please tick this box.

## I wish to make a donation of

Amount £

- I enclose a cheque/postal order for this amount OR  
 please debit my Mastercard/Visa/Maestro/CAF (delete and appropriate)

Card number

3 digit security code (located on the back of your card)

Issue number

Expiry date

/

Start date (Maestro only)

/

Signature

Date

### Gift Aid Declaration

Using Gift Aid means that for every pound you give, we are able to reclaim back from the Inland Revenue the tax paid on it – helping your donation to go further. Please tick the box below:

- Yes, I would like Muscular Dystrophy Campaign to treat all gifts that I have made in the last four years and all future donations that I make from the date of this declaration as Gift Aid donations. I will notify the charity if my gifts are no longer eligible.
- No, please do not claim Gift Aid on my donations.

To be eligible for Gift Aid you must pay an amount of Income Tax and/or Capital Gains Tax for each tax year (6 April one year to 5 April the next) that is at least equal to the amount of tax that the charity will reclaim on your gifts for that tax year.

Date \_\_\_\_\_

Please include a date here, as without a date this form is invalid. Thank you.

*giftaid it*

### Please return this form to:

FREEPOST RRL-YZEX-THXT  
Muscular Dystrophy Campaign  
61 Southwark Street  
London  
SE1 0HL

*Thank you for your support*