



# The Oesophageal Patients Association

*Caring for the cancer patient and their family*

## Gift Aid declaration

### Your details

Please ensure that you complete all details below.

Title	<input type="text"/>	First Name	<input type="text"/>
Surname	<input type="text"/>		
Address	<input type="text"/>		
<input type="text"/>			
<input type="text"/>	Postcode	<input type="text"/>	

### Declaration (tick as appropriate)

I confirm that I am a UK tax payer and that all donations, that qualify for Gift Aid, I have made in the last four years and any future donations that qualify for Gift Aid, until I notify you otherwise, should be treated as a Gift Aid donation.

I confirm that I am not a UK tax payer.

Date  /  /

### There is a small amount of legal information we have to make you aware of when you sign for Gift Aid.

I understand that I must have paid Income Tax and/or Capital Gains Tax is equal to the tax that the charity reclaims during a tax year, currently 25p for each £1 given. If your circumstances change and you no longer pay enough Income Tax or Capital Gains Tax to cover the amount claimed by the charity, you can cancel the declaration at any time by notifying the charity. Please notify the charity if you change your name or address. If you are a higher rate tax payer you can claim personal tax relief via your Self-Assessment Tax return.

When you make a donation, we will add your name and address to OPA's list of supporters, so that from time to time we can send you future information. If you would prefer that we **do not** contact you, please tick the box.