



LABRADOR WELFARE SPONSOR DOG SCHEME

MEMBERSHIP FORM

Name _____

Address _____

Post Code _____

Telephone Number _____

Date _____

Please return the completed form to:

Labrador Welfare, 48 Westwood Avenue, Godley, Hyde, Cheshire SK14 3AZ

GIFT AID FORM

I confirm that I have paid or will pay an amount of Income Tax and /or Capital Gains Tax for each tax year (6 April to 5 April) that is at least equal to the amount of tax that all the charities or Community Amateur Sports Clubs that I donate to will reclaim on my gifts for that tax year. I understand that other taxes such as VAT and Council Taxes do not qualify. I understand the charity will reclaim 25p of tax on every £1 that I give on or after 6 April 2008

Title _____ Forename(s) _____

Surname _____

Address _____

Post Code _____ Telephone no: _____

Signature _____ Date _____

Please notify Labrador Welfare if you: want to cancel this declaration /change your name or address/no longer pay sufficient tax on your income and /or capital gains

Please return the completed form to:

Labrador Welfare, 48 Westwood Avenue, Godley, Hyde, Cheshire SK14 3AZ



GENERAL MONTHLY STANDING ORDER AUTHORITY

Please pay NATIONAL WESTMINSTER BANK PLC, BROOMHILL BRANCH, SHEFFIELD
Sort Code Number 54-41-34

for the Credit of LABRADOR WELFARE, Account Number 50008528

the sum of £ (amount in figures) pounds (amount in words)

commencing the twenty-fifth day of (month) 20..... and
thereafter monthly on the twenty-fifth day of each month until you receive further notice from me/us in
writing and debit my/our account accordingly.

Account Number	Name of Bank:
Address of Bank	
Bank Sorting Code	

Your Name (in full)
Your Address
Post Code

Signature(s)
Date

PLEASE RETURN THIS FORM TO YOUR BANK