



Donation form

Please accept my donation of:

- £10 Other £ _____
- £20 I would like Care for the Wild to acknowledge my donation
- £50

Increase the value of your donation by 25%

For every pound you give us, we get an extra 25p from the Inland Revenue. *giftaid it*
This applies to all donations from today or in the last four years.

So, please tick here and fill in the date

To qualify for Gift Aid, what you pay in income tax or capital gains tax must equal the amount we will claim in the tax year. Please notify us if you want to cancel this declaration, change your name or home address or no longer pay sufficient tax on your income and/or capital gains.

If you are happy to receive acknowledgement electronically please enter your email address _____

I would like to donate by:

- Cheque*/Postal Order Debit/Credit/CAF Charity Card (details below) Direct debit (see over)

Visa/Amex/MCard/Maestro No. _____ / _____ / _____ Expiry Date ____ / ____

Card issue number (If Maestro) _____ Security Code _____ Cardholder's signature _____
Last 3 digits on back of card

*Cheques should be made payable to **Care for the Wild International** with your name and address written on the back.

- Please send me information about leaving a legacy
- Please send me information about adopting an animal
- I would like to sign up for Care for the Wild's e-Alerts
- Tick here if you are happy to share your details with other like-minded organisations

Direct Debit Mandate

I wish to pay the following amount **monthly**:

£5 £10 £20 Other £ _____

Commencing on the following date: / /

Instruction to your Bank or Building Society to pay by Direct Debit:



Please complete this instruction and return it to:
Care for the Wild International, 72 Brighton Road, Horsham RH13 5BU

Name(s) and address of account holder(s):

Mr/Mrs/Miss/Ms _____
Address _____

Postcode _____

Your Bank or Building Society Account Number:

Branch Sort Code - -

Name and full postal address of your Bank/Building Society:

To the Manager:
Address _____

Postcode _____

Originator's Identification No.

CAF Ref No. 7457-07

CAF, King's Hill, West Malling, Kent ME19 4TA

FOR CAF OFFICIAL USE ONLY -

This is not part of the instruction to your Bank/Building Society

Date of first payment on or after: / /

Instruction to your Bank or Building Society:

Please pay CAF re Care for the Wild International Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain within CAF re Care for the Wild International and if so, details will be passed electronically to my Bank/Building Society.

Signature _____

Date (dd/mm/yyyy) / /

Please note: Banks and Building Societies may not accept Direct Debit instructions for some types of account.

Thanks!

