## **REGULAR DONATION**



#### **HOPE HEALTH ACTION**

Charity Number: 1163642

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

ame and full postal address of your Bank or Building Society	Service User Number
The Manager	6 9 1 2 1 3
nk/Building Society	CAF, Kings Hill, West Malling, Kent, ME19 4TA
	Instruction to your Bank or Building Society
dress	Please pay Charities Aid Foundation 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 with
	Charities Aid Foundation and, if so, details will be
	passed electronically to my Bank/Building Society.
me(s) of Account Holder(s)	Signature(s)
ank/Building Society account number	
anch Sort Code	
	Date (DD/MM/YYYY)
	Date (DDMWTTT)
Banks and Building Societies may not accept D	irect Debit Instructions from some types of account
This is not part of the Instruction	n to your Bank or Building Society
/ly Details	Donation Details
lame	I would like to make a regular donation of £
☐ Mrs ☐ Ms ☐ Other (Please Specify)	Monthly Quarterly Half Yearly Annually Comme
I'm Emis Emis Educi (Frease apeciny)	
-mail	
	Gift Aid Declaration
Address	Please Gift Aid this donation and any donations I make in the future or have made in the past 4 years. I am a UK taxpayer and understand that if I pay les Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on my donations in that tax year, it is my responsibility to pay any difference. Please notify us if you want to cancel this declaration, change your name or address or if you no longer pay sufficient tax on your income and/or capital g
	Tick to apply
Postcode	Пок то арргу
How should we contact you?	
Please help us communicate more effectively with you by t appeals. Your data will be kept securely and not passed on your communication preferences on info@hopehealthacti	to any third parties. You can contact us at any time to char
Please contact me via: Post Email Don't sen	d me any further communications
_	
PLEASE RETURN THIS FORM TO: HOPE HEALTH ACTIO	N 25 CONEVUILI DO WEST WICKUAM KENT DDA

This guarantee should be detached and retained by the Payer

#### The Direct Debit Guarantee



- This guarantee is offered by all Banks and Building Societies that accept instructions to pay Direct Debits
- If there are any changes to the amount, date or frequency of your Direct Debit, Charities Aid Foundation will notify you ten working days in advance of your account being debited or as otherwise agreed. If you request Charities Aid Foundation to collect a payment, confirmation of the amount and date will be given to you at the time of the request





# BECOME A BENI SPONSOR WITH A REGULAR GIFT OF £15 TODAY

**The 'Maison de Benediction'** has been caring for children with disabilities in Haiti for 10 years. Without support, families living in extreme poverty often struggle to provide for the significant needs of a child with disabilities. This is why so many are tragically abandoned. Our respite home works with families to change this by providing residential places for children to receive a range of therapies, nutrition, education, and the chance to interact in a positive environment with children and adults alike.



### BENI SPONSORSHIP OF £15 A MONTH CAN...

- Provide more places for disabled children keeping more families together.
- 2 Support the development of a teenage specific programme to better care for their changing needs.
- 3 Help fund the salary of a dedicated Physiotherapist to work with the children full-time.

Become a Beni Sponsor by completing and returning the form overleaf or via our website. Find out more and sign up at www.hopehealthaction.org