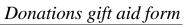
Bishop's Hatfield Girls' School



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Ð	PLEASE RETURN TO THE FINANCE OFFICE
-	ler mandate for regular gifts to your bank/building society to pay by standing order
Your account	t name:
Sort code:	Account number:
To the Mana	ger of (your bank):
Address of yo	our bank:
	Post code:
Please pay B	ishop's Hatfield Girls' School the sum of £
Frequency of	payment: Monthly / Quarterly / Annually (please select) Date of first payment:
Please contir	nue payments until further notice OR Date of last payment: (please select)
Your name: _	Signature:
	: Vear group: Date:
	letails (bank use only)
	TSB, Hitchin Branch, 1 Bancroft, Hitchin, Herts, SG5 1JG)-94-30 Account number: 28405468 Account name: Bishop's Hatfield Girls' School General Account
Reference: _	(school to complete)
Single gift	
	o make a single gift of (select one): £15 £25 £50 Other amount £
	osed (payable to Bishop's Hatfield Girls' School) OR I have paid by Wisepay (please select)
cheque enci	used (payable to bishop's natheld Gins' School) OK Thave paid by Wisepay (please select)
donation det to the amou	aration It I am a UK Taxpayer. I have read this statement and want Bishop's Hatfield Girls' School to reclaim tax on the cailed above. I understand that I must pay an amount of Income or Capital Gains Tax in the tax year at least equal nt of tax that all the charities I donate to will reclaim on my gifts in that tax year. I understand that other taxes icil Tax and VAT do not qualify. I understand that Bishop's Hatfield will reclaim 25p on every £1 I donate.
Surname:	Forename:
Address:	
	Post code:
l want Bishop as Gift Aid do	o's Hatfield Girls' School to treat all donations I make, from the date of this declaration until I notify you otherwise, onations.

Signature:

Date: