

SCHOOL FUND STANDING ORDER INSTRUCTION

Please return this form to your bank

Please complete the form using a black pen



Sacred Heart High School

Sacred Heart High School Fund
212 Hammersmith Road
London W6 7DG

Instruction to your Bank or Building Society
to pay by standing order

Standing Order Amount (Enter Figure) £ <input type="text"/>	<i>If you are currently contributing and wish to increase your contributions, please then indicate the new amount in the Amount box</i>	Frequency Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually <input type="checkbox"/>	Date in the month the payment to be made For example 4 th , 14 th , 24 th <input type="text"/>
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Name(s) of Account holder(s)

<input type="text"/>
<input type="text"/>

Credit to: Association of Parents and Teachers & Friends of the Sacred Heart (School Fund Account)

Sort Code: 40-07-30 Account no. 82508796
HSBC,5 Wimbledon Hill Road, London, Sw19 7NF

Bank/Building Society Account Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Branch Sort Code

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Instruction to pay your Bank or Building Society

Please pay the Sacred Heart High School Fund Standing Order from the account detailed in this instruction

Signatures

<input type="text"/>
<input type="text"/>
Date

Name & full postal address of your bank or Building Society

<input type="text"/>
<input type="text"/>
Post Code

Important: Please return this part to school, so we know about your donation (to Head of Development)

I have set up a standing order to pay £ to the School Fund account: ? monthly/quarterly/annually

Parent/Guardian name	<input type="text"/>	
Full Name of Student	<input type="text"/>	Sibling currently at SHHS Yes / No <i>Circle as appropriate</i>

giftaid it

If you like you can boost your donation by 25p of Gift Aid for every £1 you donate by completing below

Where two parents/guardians are eligible to sign the Gift Aid Declaration then we ask that you do so. By doing so you enable the school to reclaim tax on either parents's/guardian's donation

Gift aid is reclaimed by the charity from the tax you pay for the current tax year. Your address is needed to identify you as a UK taxpayer. I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year, it is my responsibility to pay any difference.

To Gift Aid your donation, you must tick this box

☐

I want to Gift Aid my donation above and any donations I make in the future or have made in the past 4 years

UK Taxpayer 1

UK Taxpayer 2 (if possible)

Name	Name
Signature	Signature
Address	Address
Date	Date