



Registered Charity # 1175916

Please complete the whole Form and

Post - 207 Wolverhampton Road
Pelsall, WS34AW

Email - georgetsiappourdhi@gmail.com

Phone - George on +4407738062863



Gift Aid # EW86484

YOUR DETAILS | Please complete this form using a BLACK PEN, * Indicates a MANDATORY FIELD

*Surname: / Business: *Given Name
*Mobile #: *Email
*Address:
*Suburb:
*City / County *Postcode

DEBIT ARRANGEMENT | Including payment details and associated fees/charges detailed below and or the total amount billed for the specific period for this and any other subsequent agreements or amendments between me/us and Paradise for Kids Charity # 1175916

Once Only Debit On Date: Debit this amount: £
Regular Debits Starting on Date: Debit this amount: £
Frequency: Weekly Fortnightly Monthly 4 Weekly



If you are a taxpayer you can increase the value of your donation by enabling us to reclaim tax via the Gift Aid Declaration below:

giftaid it

I confirm I have paid or will pay an amount of Income Tax and/or Capital Gains Tax for each 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 (CASCs) that I donate to will reclaim on my gifts for that tax year.

I want the charity to treat the enclosed donation as a gift aid donation.

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.

CHOOSE YOUR PAYMENT METHOD * All Credit / Debit Card transactions are processed by Paypal

Debit from Credit Card VISA MasterCard AMEX Other
Card Number: Expiry Date: Card Security Number:
Name of Cardholder:

For enhanced security, after we receive your form, we will call you for the last 4 digits & security number of your card.

By signing this form, I/we authorise Paradise for Kids Charity # 1175916 to debit payments from my specified Credit Card above, and I/we acknowledge that Paradise 4 Kids will appear as the merchant on my credit card statement.

Debit from Bank, Building Society or Credit Union Account
Financial Institution: Branch:
BSC Number /Sort Code Account Number:
Account Holder Name:

INSTRUCTIONS TO MY FINANCIAL INSTITUTION - To the Manager, I/we authorise Paradise for Kids Charity # 1175916 to debit payments from my/our specified Financial Institution identified above in accordance with the Debit Arrangement stated above in this Direct Debit Request to Paradise 4 Kids Bank Sort Code 52-21-00 Account # 18907806 being The National Westminster Bank, Leicester Customer Service Centre, 11 Western Boulevard, Bede Island, LE2 7EJ.

This Authorisation is to remain in force in accordance with the terms and conditions on this Direct Debit request with Paradise for Kids Charity # 1175916. I/We have read and understand same.

Signature(s) of Nominated Account: Date:
DDR Service Agreement (Ver 1.5)