SUPPORTING HOPE GARDENS

I would like to hear more about the work of Hope Gardens.

We like to be honest and transparent in how we communicate with you. We want you to feel comfortable about your decision to give and how Hope Gardens will contact you in the future.

I am happy to be contacted by **O** Post **O** Email **O** Phone

I am interested in **O** Hope for Children **O** Hope for Communities **O** Hope for the Church **O** Prayer

MY DETAILS

Title & Name: S	urname:
Address:	
Postcode: T	el No.:
Email Address:	
 DETAILS OF MY GIFT O I would like to support Hope Gardens by making a on recurring gifts to be given every month / quarter / year 	•••
 O Please debit by O Visa O Mastercard O Amex Card#:	r Hope Gardens' costs.
Card#:	r Hope Gardens' costs.

O I am happy to include a 1% transaction fee to cover Hope Gardens' costs.

- **O** I will set up a Standing Order to Hope Gardens' account via online banking (0 transaction fees)
- **O** I have included **a cheque / cash** made payable to Hope Gardens (0 transaction fees)
- **O** I will send funds through PayPal Giving Fund (0 transaction fees)

Signed:	Date:	

GIFT AID

- **O** Please increase my contribution by 25% at no additional cost to me by claiming Gift Aid on my donations to Hope Gardens. This includes all donations for this year and the previous 4 years, plus any future donations, unless I notify you otherwise. 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 donation in that tax year it is my responsibility to pay any difference. I will notify Hope Gardens when I want to cancel this declaration, change my name or home address or no longer pay sufficient tax on my income and / or capital gains. If you pay Income Tax at the higher rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your self-assessment or ask HMRC to adjust your tax code.
- **O** Please send me a summary of my donations at the end of the tax year so that I can add to my Self Assessment.

Signed:

_____ Date: _____

THANK YOU FOR YOUR SUPPORT!

Thank you for your support, you are changing lives! Please let us know how you would like your funds used.

- O Hope for Children
- O Hope for Communities O Hope for Churches
- Sponsor a child / child with disabilities / after school centre
- Medical centre / Sewing programme / paddy field / sustainability
- Sponsor a Bible College Student / Pastor
- O Where the need is greatest



If you prefer not to hear from us you can stop receiving our updates at any time by emailing us at info@hopegardensindia.org. For further details on how your data is used or stored, please see www.hopegardensindia.org/privacy

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