Gift Aid Declaration Form

	GHT AID DECIAR	TION FORM	emmaus South Wales
Full Name:			
Home Address:			
Postcode:			Gift Aid number:
Email Address:			
	to Gift Aid your donations, Emmau ecomes at least £12.50 at no extra		5p for each £1 donated, meaning every a difference this could make!
supportive core-selling do		ns, as the residents are know	ance to regain self-respect in a n, work full-time in the Social Enterprise porting through their business with any
By signing th	nis form, I confirm that:		
• I wish Emr	maus South Wales to claim tax on	all donations I make in the fu	ture or have made in the past 4 years.
 I wish Emr VAT. 	maus South Wales to act as my ag	gent in selling the goods I hav	e donated at a rate of 1% commission +
	ast 18 years of age and am not acti to a legally binding contract with E	-	goods to Emmaus South Wales and am
	taxpayer and understand that if I ped on all of my donations in that tax	-	capital Gains Tax than the amount of Gift pay the difference.
	nd that if Emmaus South Wales ar as they see fit.	e unable to sell any of the go	ods, they will have the right to dispose of
 I agree that for sale. 	at Emmaus South Wales will not be	e responsible for any loss or o	damage to any goods brought into the shop
•	Emmaus South Wales in the ever Capital Gains tax or if I wish to ca		nal circumstances, if I no longer pay UK
	South Wales will inform me of any e to retain or donate these procee		donated goods in excess of £100 and I
	ry may terminate this agreement at his agreement at any time by writte		nd Emmaus South Wales may vary the
Signature:		Date:	