

Gift Aid Declaration *giftaid it*

Did you know for every £1 that you give we can claim 25p back in tax at no extra cost to yourself. This means your £18.50 donation will be worth over £4 more to us. You must pay an amount of Income Tax and/or Capital Gains Tax at least equal to the tax that the charity reclaims on your donations in the appropriate tax year,

Your details:

Mr/Mrs/Miss/Ms (please indicate) _____

First name : _____

Surname: _____

Address: _____

Postcode: _____

- I wish North Devon Theatres' Trust to treat the enclosed donation of £18.50 as a Gift Aid donation **and** all donations I make from the date of this declaration until I notify you otherwise, as Gift Aid donations.
- I wish North Devon Theatres' Trust to treat the enclosed donation of £18.50 as a Gift Aid donation.
- I wish to include all donations I have made for the six tax years prior to the year of this declaration **and** all donations I make from the date of this declaration until I notify you otherwise, as Gift Aid donations.

(tick as appropriate)

Signed _____ Date _____

1. You can cancel this declaration at any time by notifying us.
2. If in the future your circumstances change and you no longer pay tax on your income and capital gains equal to the tax that the North Devon Theatres' Trust reclaims, you can cancel your declaration. Please notify us if you change your name or address.
3. If you pay tax at the higher rate you can claim further tax relief in your Self Assessment tax return.
4. If you are unsure whether your donations qualify for Gift Aid please ask us.

why not consider

Friends Membership



If you love the performing arts why not play your part and become a Friend of the North Devon Theatres. Your support is essential to our continuing success and development and you will receive some unique benefits along the way.

- ◇ Seven days advance information and priority booking ahead of the general public for theatre events at The Queen's Theatre, Barnstaple and The Landmark Theatre, Ilfracombe. (Due to different show contracts, this cannot be guaranteed on all shows).
- ◇ Free 'in-house' programme on various shows.
- ◇ Best available seats guaranteed during Friends' priority booking.
- ◇ Priority on returned tickets for any sold-out shows.
- ◇ A regular newsletter providing details of future plans and current activities.
- ◇ A chance to meet the stars at various post-show receptions.
- ◇ Free postage on tickets and free ticket exchange.



Please fill in details and return to:

Deborah Cooke
Friends' Co-ordinator
Landmark Theatre
Wilder Road
Ilfracombe, EX34 9BZ
01271 869 212

debbie.cooke@northdevontheatres.org.uk

Membership Application

New membership

Membership renewal (please tick appropriate box)

Mr/Mrs/Miss/Ms (please indicate) _____

First name : _____

Surname: _____

Address: _____

Postcode: _____

Telephone No: _____

Email: _____

Membership No (if renewing) : _____

- For membership please enclose payment of £18.50 (made payable to 'Friends' of North Devon Theatres').
- To pay by credit card please contact the Box Office on 01271 324242.
- Please return this form and remittance in the pre-paid envelope provided.
- To pay by direct debit please fill in your bank details on the opposite page

Thank you for your generosity. To make your support go even further, at no extra cost, please see the back page to gift aid your donation.

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Direct Debit

Instruction to your Bank or Building Society
 Originators Identification Number: **830881**

Name and full postal address of your Bank/Building Society

To the Manager	Postcode:
Bank/Building Society:	
Address:	Bank/Building Society:
Postcode:	To the Manager

Name of Account Holder: _____

Sort Code

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Account Number

--	--	--	--	--	--	--	--	--	--	--	--

Friends of North Devon Theatres reference number (for office use only)

Instruction to your Bank/Building Society:

Please pay the Friends of North Devon Theatre Direct Debits from the account detailed on this instruction subject to the safeguards assured by the Direct Debit Guarantee.

Signature of Account Holder: _____

Date: _____

