



# CdLS Foundation UK & Ireland

The Cornelia de Lange Syndrome Charity Reg. No. 1054033

"The CdLS Foundation UK & Ireland is a family support organisation which exists to ensure early and accurate diagnosis of CdLS throughout the world, promoting research, and enabling individuals, families, friends and professionals make informed decisions and plan for the affected person's present and future."

## STANDING ORDER/DONATION FORM

**Yes! I want to help CdLS make a difference to those in need.**

### MY DETAILS

Please complete your details

Title	Mr	Mrs	Miss	Ms	Other _____
First Name	[ ]		Surname	[ ]	
Address	[ ]				
	[ ]				
	[ ]				
Post Code	[ ]		Date of Birth	[ ]	
Telephone	[ ]				
Email	[ ]				

### Gift Aid your donation

*giftaid it*

Gift Aid means that for every £1 you give, we get an extra 28 pence from Inland Revenue, helping your donation go further. This means that £10 can be turned into £12.80 just as long as donations are made through Gift Aid. If you want your donation to go further, please tick the box below. Thank you.

**Yes!** I am a UK tax payer and would like CdLS to claim back tax on all donations I have made this year and the six tax years prior to the year of this declaration, and on any future donations I make.

\*To qualify for Gift Aid the amount of income/capital gains tax you pay has to be at least equal to the amount CdLS will claim in the tax year.

### BANKER'S ORDER FORM

To make a regular gift through your bank account simply complete and sign this form

Name and full postal address of your Bank or Building Society	
To the Manager	[ ]
Branch and Address	[ ]
	[ ]
	[ ]
Name(s) of Account Holder(s)	[ ]
Bank/Building Society Account Number	[ ]
Branch Sort Code	[ ] [ ] - [ ] [ ] - [ ] [ ]

**Please debit my account with the sum of:**

£5    £10    £15    £20    **my preferred amount of: £** [ ] (whatever you give will be greatly valued)

On \_\_\_\_ day \_\_\_\_ month \_\_\_\_ year (please allow 1 month from today) and thereafter monthly / quarterly / annually (delete as appropriate) until further notice.

To be paid to the CdLS Foundation UK & Ireland account with Lloyds Bank PLC, Ellesmere Port. Sort Code: 30-12-96, Account No. 00259299.

Signature	[ ]	Date	[ ]	/	[ ]	/	[ ]
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### DONATION FORM

To donate please complete and sign this form.

**I am enclosing a gift of: £** [ ]

I enclose a CHEQUE (payable to CdLS Foundation UK & Ireland)

Please debit my: VISA / MASTERCARD / Charity Card / SWITCH / OTHER (please specify): \_\_\_\_\_

Card No: [ ]

Expires: [ ] [ ] (mm/yy)

Card Security Code: [ ] (digits printed on or by signature strip)

Debit card Start date: [ ] [ ] (mm/yy)

Debit card Issue number: [ ]

Signature \_\_\_\_\_

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Reference No:..... (For office use)**

**Please return the completed and signed form to:**

CdLS Foundation UK & Ireland, PO Box 8368, Ripley, Derbyshire, DE5 4DA