

Donation Form

Please accept my donation of:

£5 £10 £20 £50 £100

Other amount £ _____

I enclose a cheque made payable to Leeds Women's Aid

Title:	First Name:	Surname:
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Address:

Postcode

Email

(Please complete if you are happy to be contacted by email.)

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Gift Aid – Increase your gift by 25 per cent at no extra cost to you

If you are a UK taxpayer make your gift worth 25 per cent more at no extra cost to you by ticking the Gift Aid box above. I am a UK taxpayer and would like Leeds Women's Aid to treat this donation and all future donations, until I notify you otherwise as, as Gift Aid donations.

Date /...../.....

Keeping in touch

Leeds Women's Aid would like to keep you informed about our work and what you are helping us to achieve. We will not pass your details on to any third parties.

Please tick this box if you prefer not to receive further communications from us.

Thank you for your support