stewardship®



I would like to open an account to support:

New Sight Eye Care

A. Fodi Contact actails Hease com	plete in BLOCK CAPITALS using BLACK IN	K. Ose a sepa	nate sheet if more space is required			
Title: Mr/Mrs/Miss/Dr/Rev	Surname:	ı	orenames:			
Home address:						
Postcode:			Daytime telephone:			
Email:						
Do you already have an account with St	ewardship? Yes No. If yes, wh	hat is your ac	count number?			
Stewardship will communicate with you by email unless specified. To receive communications by post, please tick here						
B. Your gift aid declaration (this of I declare my intention that tax should be recovered.)		ions I make to	Stewardship (full name Stewardship			
Services (UKET) Limited) from the date of this the four years prior to this year. I understand at least equal to the amount of tax that Stewa tax year. I understand that other taxes such a give (28p on gifts prior to 6 April 2008). If I damount claimed.	that I must pay enough income tax and/or ca rdship (and any other charities or Community s VAT and Council Tax do not qualify and th	apital gains tax y Amateur Spo at Stewardship	for each tax year (6 April to 5 April) th rts Clubs) will reclaim on my giving in a will reclaim 25p of tax on every £1 tha	act is each aiftaid it		
Signature:			Date:			
C. Direct Debit Instruction						
Instruction to your bank or b Name and full postal address of your ba	, , ,	ect Debit	t			
Bank / Building society: Address:		Instruction to your bank or building society. Please pay Stewardship (Stewardship services (UKET) Limited) Direct Debits from the account				
		detailed in this instruction subject to the safeguards assured by the Direct Debit				
	Postcode:	Guarantee. I remain with	understand that this instruction may Stewardship and, if so, details will be	Service user number:		
Name(s) of account holders(s):		passed electronically to my bank/building society.		9 8 2 1 1 7		
		Signature(s)		Reference number (office use only):		
Bank/building society number:		Stewardship, PO Box 99 Loughton, Essex IG10 3				
Branch sort code:				Loaginon, Essex 1010 009		
		Print name(s	s):	Date:		
Banks and Building Societies may not accept Direct	Debit Instructions for some types of account.					
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The Direct Debit Guarantee: This Guarantee should be detached and retained by the payer

This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.



- If there are any changes to the amount, date or frequency of your Direct Debit, Stewardship will notify you 5 working days in advance of your account being debited or as otherwise agreed. If you request Stewardship to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit by Stewardship or your bank or building society you are entitled to a full and immediate refund of the amount pair from your bank or building society.
- If you receive a refund you are not entitled to, you must pay it back when Stewardship asks you to.

D. Details of my support Regular giving - Please make the following monthly* donations out of my giving account **ANONYMOUS RECIPIENT DETAILS SEND GIFT** START DATE AMOUNT (name, address (house number, street and postcode), charity number etc.) AID?** dd/mm/yy GIFT? Yes Yes 1. New Sight Eye Care The Megacentre 32 York Road LS9 8SY Charity number: £. Nο Nο 1144893 Yes Yes 2. £ No Νo Yes Yes 3. £. Nο Nο In addition to the above donations, I would like to accrue the following amount in my £ Stewardship account on a monthly basis to donate to charitable causes at a later date: £ Total of regular giving to be transferred from my bank account: *Please contact us if you would like to set up your regular giving at an alternative frequency to monthly. **If you are a UK tax payer, requesting that we claim the Gift Aid on this donated amount will increase the value of your charitable gift by 25%. If you do not tick this box but have completed section B of this form, any Gift Aid amount will accrue in your Stewardship giving account. One-off giving - I would like to make a one-off gift for the support of:

RECIPIENT DETAILS (name, address (house number, street and postcode), charity number etc.)	AMOUNT	SEND GIFT AID?**	ANONYMOUS GIFT?	PAYMENT METHOD		
1. New Sight Eye Care The Megacentre 32 York Road LS9 8SY Charity number: 1144893	£	☐ Yes ☐ No		☐ Cheque encl☐ Direct Debit		
2.	£	Yes No		☐ Cheque encl☐ Direct Debit		
3.	£	☐ Yes ☐ No		☐ Cheque encl☐ Direct Debit		
I enclose a cheque (minimum £30.00) for the full amount, payable to "Stewardship" (please tick if enclosed)						

E. Things you need to know

- 1. Gift Aid tax claims
- 1.1 If you are a UK tax payer, we may be able to claim tax on your gifts to Stewardship under the Gift Aid Scheme
- 1.2 You need to have paid enough income tax or capital gains tax in each year to cover the amount of tax reclaimed on your giving.
- 1.3 If you make gifts under the Gift Aid Scheme to other charitable organisations, you need to ensure you have paid enough tax to cover reclaimed tax on all your giving.
- 1.4 Your gifts should not be based on the tax paid by another person (e.g. husband or wife) but by you personally.
- 1.5 If you cease to be a UK tax payer or to pay enough tax, you should notify Stewardship so we do not reclaim too much tax on your giving. You will be liable to refund HM Revenue & Customs if you have not paid the amount in tax that we reclaim

If you are not a UK tax payer, you can still make gifts to Stewardship. Please ensure that you do not tick the 'Gift Aid it?' boxes and do not sign the Gift Aid Declaration.

- 2. Stewardship's deductions
- 2.1 There is no direct cost to you. 1 Stewardship retains 3% of the total gift (original gift
- + tax) and this amount is deducted from the reclaimed tax.

- 2.2 For non Gift Aided aifts, Stewardship will retain 2% of the aift amount.
- 2.3 We retain a minimum amount of £5 for one-off gifts by cheque.
- 3. Donation requests for close relatives
- 3.1 If you are requesting a donation for a close relative (a close relative is a: child, grandchild, parent, grandparent, sibling or spouse of any of these) some restrictions apply.
- 3.2 Stewardship are not able to consider donation requests for a close relative if they are a bible college student.
- 3.3 Donation requests for Christian workers who are close relatives are subject to Stewardship's normal approvals and can only be used for the individual's ministry expenses. For more information, please refer to our guide.
- 4. Any investment income which may be earned on balances held in your Stewardship account belongs to and will form part of Stewardship's general funds
- 5. Your gifts to Stewardship are given for the support of this recipient(s) and should not be in consequence of, nor result in the recipient providing any form of payment or benefit to you, your family, or others connected with them.

For full details on terms and conditions of our giving service, please visit stewardship.org.uk/terms.

Once complete, please return to: Stewardship, PO Box 99, Loughton, Essex, IG10 3QJ

ref: 20120843

For further information or assistance, please contact our giving services team on 020 8502 8560 or email giving@stewardship.org.uk.



Legal ownership

Your giving is to Stewardship and, as the funds belong to us, all grants from Stewardship to recipients are at the sole discretion of our trustees. In the event that any of your requested recipient(s) become ineligible to receive support from Stewardship, no part of your gift can be returned, but you will be free to request donations for alternative recipient(s), churches or charities.

Contact us

t: 020 8502 8560