

**THE SMILES FOUNDATION**

P. O. Box HK 70, Leeds, LS11 6YR

Tel: 0113-276-5060

*The Smiles*  
**FOUNDATION**



**SUPPORT DETAILS:**

- I would like to support the Project(s) detailed below with a regular monthly gift.
- I would like to support the Project(s) detailed below with a one time gift.

**ALLOCATION OF SUPPORT:**

- Wherever** the need is greatest
- Smiles 100 Love Club**                       **Smiles 200 Hope Club**
- Smiles 300 Grow Club**                       **Smiles 400 Faith Club**
- Smiles 500 Care Club**                       **HiFive Club**
- Sponsorship** / Any other (Please detail) \_\_\_\_\_



**PLEASE PRINT CLEARLY:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

(Please add my email address to the list for regular updates on Smiles News)

I attach/enclose Cheque for £ \_\_\_\_\_ payable to Smiles. Mailed to the Leeds address.

or

I would like to charge my Visa/Mastercard     Credit     Debit

Card Number:

Valid From: \_\_\_/\_\_\_/\_\_\_ Expires End: \_\_\_/\_\_\_/\_\_\_      3 Digit Security Code: \_\_\_/\_\_\_/\_\_\_ (on signature strip)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

You can also make a secure online Gift at [www.thesmilesfoundation.org](http://www.thesmilesfoundation.org) or by telephone with a Visa/Mastercard (Debit or Credit) by calling **0113-276-5060** (Monday to Friday 9am to 6pm).

Please send me further information on **Mission Trips to Romania**:     **By Email**     **By regular mail**

If you are making a regular gift through your Bank, please complete the form overleaf.

If you are a UK Taxpayer, please complete the Gift Aid Form overleaf.

A receipt will be sent for all donations received.

Registered Charity No: 1087961

## BANK STANDING ORDER MANDATE

When completed please return this form to:

The Smiles Foundation, P O Box HK70, Leeds LS11 6YR

**\*\* PLEASE DO NOT SEND TO YOUR BANK \*\***



I wish to make Monthly/Annual donation of £ \_\_\_\_\_

Please complete **YOUR** Bank details:

Bank Name: \_\_\_\_\_

Address of your Bank: \_\_\_\_\_

\_\_\_\_\_ Post code: \_\_\_\_\_

Please credit: **The Smiles Foundation, Account number: 02076954 Sort Code: 30 00 05  
Lloyds Bank, Leeds Branch, 6 Park Row, Leeds LS1 1NX**

The sum of £ \_\_\_\_\_ Words: \_\_\_\_\_

Each Month/Year starting on \_\_\_ / \_\_\_ / \_\_\_ or immediately on receipt of this order,  
whichever is the later date and thereafter until cancelled by me.

Debiting my account number: \_\_\_\_\_ Sort code: \_\_\_ / \_\_\_ / \_\_\_

In the name of: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

*giftaid it*

Please treat as Gift Aid Donations all qualifying gifts of money made today and in the future. I confirm that I have paid or will pay an amount of income Tax and/or Capital Gains Tax for each tax year (6 April to 5 April) that is at least equal to the amount of the tax that all the charities of SASCs that I donate to will reclaim on my gifts for that tax year. I understand that other taxes such as VAT and Council Tax do not qualify. I understand the **The Smiles Foundation** (1087961) will reclaim 25p of tax on every £1 that I give on or after 6 April 2008.

Please complete your details here using blue or black ink:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

**Please notify the Charity if you:** 1. Want to cancel this declaration; 2. Change your name or home address;  
3. No longer pay sufficient tax on your income and/or capital gains.