MAKING A GIFT TO



YOUR DETAILS

Full Name	
Billing address	
Including Post Code	
Telephone	
Email	
Pledge Information	
A regular gift by Sta	anding Order
	ar gift by Standing Order over one or more years to The Scotland College of Chiropractic apleted the Standing Order form attached.
A single gift	
I (we) wish to make a single g	gift to The Scotland College of Chiropractic Charitable Trust of the following amount
£	
I enclose a cheque Please charge my card	made payable to The Scotland College of Chiropractic Charitable Trust
Credit card type Exp. date	
Credit card number/Securit	
Authorized signature	
	and choose to give by Gift Aid, the Trust will be able to increase your gift by g tax from HM Revenue and Customs at no extra cost to you.
I declare that I am	a UK taxpayer and I would like all my donations treated as Gift Aid.
Please use the following na	me(s) in all acknowledgements:
Signature(s)	Date
Signature(s)	Date

MAKING A GIFT TO



To (name and address of bank/building society)

Sort Code:	Account Number:		
Name(s) of Account Holder(s)			
Address:			
· · · · · · · · · · · · · · · · · · ·			
	Postcode:		
I would like to make a regular paymer	nt to The Scotland Colle	ge of Chiropractic Ch	aritable Trust of
£125 £250 £500	Other amount	£	per month/year
Starting on (date):		for a period of:	months/years/ongoing
Clydesdale Bank PLC, 30 St Vincent P Account Name: The Scotland College Account Number: 00027745 Sort Coc	of Chiropractic Charita	ole Trust	
Account Holder(s)			
Signature(s)		Date	
Signature(s)		Date	