

# SUPPORT FORM

Please fill in the relevant sections and return.

*giftaid it*

TITLE  NAME/INITIAL  SURNAME

ADDRESS

POSTCODE  Contact No.

CONTACT TELEPHONE NUMBER

EMAIL ADDRESS

1) I wish to donate the total value of the tickets I have currently booked for productions at Jermyn Street Theatre.

**PLEASE TICK IF 'YES':**

Office use only:

## AND/OR

2) I wish to make a single donation to Jermyn Street Theatre.

**PLEASE TICK IF 'YES':**

Please find enclosed a cheque OR I authorise you to debit my debit/credit card with the specified amount.

(Please make cheques payable to Jermyn Street Theatre and please note we do not accept American Express)

Amount    £30    £50    £100    £250    £500    Other...  
                       

Visa Credit        Visa Debit        Mastercard        Maestro   

Cardholder's Name

Card Number

Start Date    M M Y Y    Expiry Date    M M Y Y

Security   
(Last 3 digits on back of card)

### Gift Aid Declaration

I would like Jermyn Street Theatre (Reg. Charity No. 1186940) to treat all the donations I have made for this tax year and the four years prior to the year of this declaration, and all donations I make from the date of this declaration until I notify you otherwise, as Gift Aid donations.

I confirm 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 tax that all the charities or Community Amateur Sports Clubs (CASCs) 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 charity will reclaim 25p of tax on every £1 that I give.

Signed  Date

Please email this form to: [info@jermynstreettheatre.co.uk](mailto:info@jermynstreettheatre.co.uk)  
 (You can also print and complete this form in pen, and then scan/photograph it to email it.)

Or send via post to:

Penny Horner, Executive Director | JERMYN STREET THEATRE, 16b Jermyn Street, London, SW1Y 6ST