



Title _____ First name _____ Last name _____

Address _____

Postcode _____ Phone _____ Email _____

We'd like to keep you updated with our news, events and fundraising activities. Please 'tick' below to confirm if you wish to receive information via: Email Post Phone SMS

For further details on how your data is used and stored please see our privacy policy available on our website: www.tuberous-sclerosis.org/privacy.

I would like to make a monthly gift of: £5 £9 £20 Other (please specify)

On the : 1st 16th of each month (please tick)

I would like to make a single gift of: £20 £50 £100 Other (please specify)

Please enclose a cheque/postal order made payable to 'Tuberous Sclerosis Association' or you can make your donation online at tuberous-sclerosis.org/donate or over the phone on **0300 222 5737**.

Help us make your gift go even further!

If you are a UK taxpayer, we can reclaim the tax that you have already paid on your donation from HMRC. This means we can get an extra 25% at **no additional cost to you.**

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Date : _____ Signature: _____

I want Tuberous Sclerosis Association to treat my donation and all those I have made in the last 4 years and all those I might make to them in the future, as a Gift Aid donation. I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference. I will let the TSA know if I wish to cancel this declaration, change my name or my home address or if I no longer pay sufficient amounts of Income and/or Capital Gains Tax.

Instruction to your Bank or Building Society to pay by Direct Debit

(Complete for monthly gifts only)

Name and full postal address of your Bank or Building Society

Bank Name:

Bank Address:

Postcode

Name(s) of Account Holder(s)

Account number

Sort Code

Service user number

6 9 1 2 1 3

Instruction to your Bank or Building Society

Please pay Tuberous Sclerosis Association direct debits from the account detailed on this instruction, subject to the safeguards assured by the direct debit guarantee. I understand that this instruction remains with Tuberous Sclerosis Association and, if so, details will be passed to my Bank/Building society.

Signature(s)

Date



Please return this form to 'The TSA, c/o Nightingale House, 46-48 East Street, Epsom, Surrey, KT17 1HQ' - Thank you!