

Supporting Asthma UK with a Direct Debit



1 Your details

Title Mr Mrs Ms Miss Dr Other

First name Surname

Address

Postcode

Email (Optional) Telephone/mobile (Optional)

We would like to keep you informed about the work that we do and about asthma-related news, health advice, appeals, events, campaigns and research.

- Yes!** I'd like to hear from you by post
 Yes! I'd like to hear from you by email
 Yes! I'd like to hear from you by phone
 Yes! I'd like to hear from you by text message

We do not share or sell any personal details with third-parties for commercial purposes. You can change your preferences at any time by calling our Supporter Care team on **0300 222 5800** or emailing **info@asthma.org.uk**

By providing us with any personal information you consent to the terms and conditions of our privacy policy available at **www.asthma.org.uk/privacy** or by calling the number above.

2 About your Direct Debit

Please pay Asthma UK the sum of £ on the 5th 15th day of - (Please make this at least a month from today's date)
and afterwards on the same day monthly quarterly annually

Standing order cancellation: if you have a previous standing order which you think might still be active, please remember to cancel this with your bank

3 Instructions to your bank or building society to pay by Direct Debit



Name(s) of account holder(s)

Originator's ID number

Reference number (For office use only)

Bank/building society account number

Branch sort code - -

Branch name

Branch address

Postcode

Signed

Date - -

Instructions to your bank or building society

Please pay Asthma UK (National Asthma Campaign) direct debits from the account detailed in this instruction, subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with Asthma UK (National Asthma Campaign) and, if so, details will be passed electronically to my bank or building society.

4 Boost your donation by 25p for every £1 you donate at no extra cost to you!

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- Yes!** I want to Gift Aid my donation and any other donations I make in the future or have made in the past four years to Asthma UK. 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.

Date - -

- I am not a UK tax payer, Gift Aid does not apply to me.

Your address is needed to identify you as a current UK taxpayer. If you would like to cancel this declaration, change your name or home address or if you no longer pay sufficient tax on your income and/or capital gains please contact our Supporter Care team on **0300 222 5800**.

5 Please return this form to **FREEPOST RTHK-ZXHK-YXSG, Asthma UK, 18 Mansell Street, London E1 8AA**

You can also donate by calling **0300 222 5800** or by visiting **www.asthma.org.uk/donate**



Thank you for your support