

Please complete this form in BLOCK CAPITALS – thank you

Name	<input type="text"/>	Telephone No	<input type="text"/>
Address	<input type="text"/>	Email	<input type="text"/>
	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
Postcode	<input type="text"/>		

(please tick)

- ☐ I am interested in making a bequest in my will.
Please send further information
- ☐ I do not want my name to appear on a list of
Heriot-Watt Benefactors

Single donation


I wish to make a single donation of	£ <input type="text"/>	<input type="checkbox"/> I enclose a Cheque / CAF voucher* made payable to Heriot-Watt University Annual Fund	<i>* Delete as appropriate</i>
Name on card	<input type="text"/>	<input type="checkbox"/> I wish to pay by credit card, and authorise you to debit my VISA / Mastercard / CAF Card / Switch*	
My card number is	<input type="text"/>	3 Digit Security Number	<input type="text"/>
Start Date	<input type="text"/> / <input type="text"/>	Expiry Date	<input type="text"/> / <input type="text"/>
Signature	<input type="text"/>	Date	<input type="text"/> / <input type="text"/> / <input type="text"/> (dd/mm/yy)

Regular Donation by Direct Debit

I wish to make a regular gift of £ per (month / quarter / year)

Starting on: First available collection date *or* (dd/mm/yyyy) 0 1 / /

INSTRUCTION TO YOUR BANK OR BUILDING SOCIETY TO PAY BY DIRECT DEBIT

Bank/Building Society	<input type="text"/>	Service User Number: 277937  Instruction to your bank or building society Please pay CTT Charity Payments Direct Debits, from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. (CTT Charity Payments process Direct Debits on behalf of Heriot-Watt University). I understand that this instruction may remain with CTT Charity Payments and if so, details will be passed electronically to my Bank/Building Society.	
Bank/Building Society Address	<input type="text"/>		
	Postcode <input type="text"/>		
Name of Account Holder(s)	<input type="text"/>		
Bank Sort Code:	<input type="text"/>	Account No:	<input type="text"/>
Signature:	<input type="text"/>	Date:	<input type="text"/>

Purpose of donation

I would like my donation to support

General Annual Fund needs ☐ Access Bursaries ☐ Scholarships ☐ Music at Heriot-Watt ☐ Other

Help us make the most of your donation

Gift Aid declaration

Please tick the box below to boost your donation by 25p of Gift Aid for every £1 you donate

☐ I want to Gift Aid this donation and any donations I make in the future or have made in the past 4 years to Heriot-Watt University.

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.

Signature Date / / (dd/mm/yy)