Thank you for your kind donation

Your regular gift will help people living with autism.

The National Autistic Society

Please complete this whole form in CAPITALS and return to:
Freepost Plus RSJA-SUJH-HAKL The National Autistic Society, 391 - 393 City Road, London, EC1V 1NG.

Making a new Direct Debit donation to The National Autistic Society

I wish to Donate £

☐ Monthly ☐ Quarterly ☐ Annually

Please debit my account on the (please tick) day of the next possible month and thereafter until further notice ☐ 2nd day OR ☐ 15th day

Title: Forename(s):

Surname:

Home Address:

Town: Postcode:

Email:

Phone: Mobile:

Make your gift worth 25% more and it won't cost you a penny. giftaid it

☐ I am a UK taxpayer and I would like The National Autistic Society to treat all gifts of money that I have made in the past four financial years (6 April one year to 5 April the next year) and all future gifts of money that I make from the date of this declaration as Gift Aid donations. **I confirm that I pay an amount of income tax and/or capital gains tax at least equal to the tax that The National Autistic Society will claim from HM Revenue & Customs on my Gift Aid donation(s).**

☐ I am not a UK tax payer

Signature

Date - - DD-MM-YY

The National Autistic Society would like to keep you informed about our services, upcoming news, events and fundraising activities. We will look after your data as set out in our privacy and data protection policy available on our website www.autism.org.uk/pivacypolicy

If you prefer not to receive information by post please tick this box ☐ If you prefer not to receive information by telephone please tick this box ☐

To receive information by email please tick this box ☐ To receive information via your mobile phone please tick this box ☐

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

DIRECT Debit

Please return the whole form to: Freepost Plus RSJA-SUJH-HAKL
The National Autistic Society, 391 - 393 City Road, London, EC1V 1NG.

Name and full address of your Bank or Building Society

To the Manager Bank / Building Society

Full postal address

Postcode

Name(s) of account holder(s)

Bank / Building Society account number

Branch Sort Code - -

Service User number	7	5	6	4	7	5

Reference

Instruction to your Bank or Building Society

Please pay The National Autistic Society 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 The National Autistic Society and, if so, details will be passed electronically to my bank/building society.

Signature(s)

Date (DD - MM - YYYY)

Banks and Building Societies may not accept Direct Debit instructions for some types of account

This guarantee should be detached and retained by the payer.

The Direct Debit Guarantee

DIRECT Debit

This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits

If there are any changes to the amount, date or frequency of your Direct Debit The National Autistic Society will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request The National Autistic Society to collect a payment, confirmation of the amount and date will be given to you at the time of the request.

If an error is made in the payment of your Direct Debit, by The National Autistic Society or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society.

- If you receive a refund you are not entitled to, you must pay it back when The National Autistic Society asks you to.

You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.