Thank you so much for your support!

Charity No. 223660

Please complete the relevant sections and return the whole form to:
Fundraising Team, Birmingham Repertory Theatre, 6 Centenary Square, Birmingham, B1 2EP

Personal Details

Name:
Address:

Email: [ ]
Telephone: [ ]

Are you happy to receive information about future productions, offers and activities from The REP? [ ] Yes / [ ] No
Are you happy to receive information about The REP’s fundraising activities? [ ] Yes / [ ] No

Gift Details

Donors who give £12.50 a month, or the equivalent per annum, are able to become REP Friends. These supporters are an important part of The REP family. REP Friends are invited to special events and experiences throughout the year where they meet fellow REP supporters and theatre lovers. REP Friends are credited on The REP website and receive regular updates.

I wish to make a gift of £___________ per month / year * starting on the 1st / 22nd * of the month. Payments will continue until further notice or until you advise your bank or The REP. (*please delete as appropriate)

Gift Aid Declaration

If you are a UK tax payer Gift Aid allows the BIRMINGHAM REPERTORY THEATRE to reclaim the basic rate of tax paid on your gift, increasing its value by 25p per £1 at no cost to you. If you are a higher rate tax payer, you can claim the tax relief on your self-assessment tax return.

[ ] I would like the BIRMINGHAM REPERTORY THEATRE to treat this donation, and all future donations I make from the date of this declaration, as Gift Aid donations.

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 understand that I can cancel this declaration at any time by contacting the Fundraising Team.

Signed: ____________________________ Date: __________/________/______

Instruction to your bank or building society to pay by Direct Debit

To: The Manager
Bank/building society

Address

Postcode

Name(s) of account holder(s)

Branch Sort Code [ ] - [ ] - [ ]

Bank/building society account number [ ] [ ] [ ] [ ] [ ] [ ]

Signature(s)

Date: __________/________/______

Banks and building societies may not accept Direct Debit instructions for some types of account.