

Charity Number: 1144579

Leicester Disabled Action Group (LDAG) Registered charity DONATION FORM

Leicester Disabled Action Group is voluntary group that aims to support and help people with disabilities from the community in Leicester to improve their quality of life by empowering them through developing their basic skills. We can only achieve this with the help of people like you. Please give whatever you can today.

Mr / Mrs / Miss / Ms First Name _____ Surname _____

Address _____

Post Code _____

Telephone _____ Email Address _____

We'd like to keep in touch via email. If you are happy with this please write your email address in the space provided. You can stop receiving emails at any time and we will not share your email address with any other organisations.

I enclose a cheque / postal order made payable to LDAG' for £5 £20 £40 Other _____

Or I wish to set up a monthly/quarterly direct debit for £10 £30 £50 Other _____

Please complete the direct debit mandate below.

Please notify LDAG if you wish to cancel the declaration, change your name or home address or no longer pay your contribution.

Direct Debit Mandate

Instruction to your Bank or Building Society



Bank Address: HSBC,

Account No: 93949273, Sort code: 40 28 06

Please send this completed instruction to:

Leicester Disabled Action Group, 10 Malabar RD, Leicester, LE1 2PD

Name(s) and address of account holder(s)

Mr/Mrs/Miss/Ms

Address

Instruction to your Bank or Building Society

Please pay LDAG 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 LDAG and if so, details will be passed electronically to my Bank/Building Society

Amount to be debited from my account £ _____

Frequency MONTHLY / QUARTERLY

Date of first payment ____ / ____ / ____

Bank/Building Society account number

--	--	--	--	--	--	--	--

Branch Sort Code

--	--	--	--	--	--	--	--	--	--

Signature _____ Date ____ / ____ / ____

Name and full postal address of your Bank/Building society

To: The Manager

Address

Postcode

FOR LDAG FICIAL USE ONLY – This is not part of the instruction to your Bank/ Building Society

Date of first payment on or after:

/ /

**Leicester Disabled Action Group (LDAG) Registered charity
DONATION FORM**

Charity Number: 1144579

Leicester Disabled Action Group is voluntary group that aims to support and help people with disabilities from the community in Leicester to improve their quality of life by empowering them through developing their basic skills. We can only achieve this with the help of people like you. Please give whatever you can today.

Mr / Mrs / Miss / Ms First Name _____ Surname _____

Address _____

Post Code _____

Telephone _____ Email Address _____

We'd like to keep in touch via email. If you are happy with this please write your email address in the space provided. You can stop receiving emails at any time and we will not share your email address with any other organisations.

I enclose a cheque / postal order made payable to LDAG' for £5 £20 £40 Other _____

Or I wish to set up a monthly/quarterly direct debit for £10 £30 £50 Other _____

Please complete the direct debit mandate below.

Please notify LDAG if you wish to cancel the declaration, change your name or home address or no longer pay your contribution.

Direct Debit Mandate

Instruction to your Bank or Building Society



**Bank Address: HSBC,
Account No: 93949273, Sort code: 40 28 06**

Please send this completed instruction to:

Leicester Disabled Action Group, 10 Malabar RD, Leicester, LE1 2PD

Name(s) and address of account holder(s)

Mr/Mrs/Miss/Ms
Address

Instruction to your Bank or Building Society

Please pay LDAG 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 LDAG and if so, details will be passed electronically to my Bank/Building Society

Bank/Building Society account number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------

Amount to be debited from my account £ _____

Frequency MONTHLY / QUARTERLY

Date of first payment ____ / ____ / ____

Branch Sort Code

<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>
----------------------	----------------------	---	----------------------	----------------------	---	----------------------	----------------------

Signature _____ Date ____ / ____ / ____

Name and full postal address of your Bank/Building society

To: The Manager
Address
Postcode

FOR LDAG FICIAL USE ONLY – This is not part of the instruction to your Bank/ Building Society

Date of first payment on or after:

/ /

Please note: Some banks and building societies may not accept direct debits for some types of accounts.

Please note: Some banks and building societies may not accept direct debits for some types of accounts.