

GIFT FORM

Title _____
Forename _____
Surname _____
Address _____

Postcode _____
Country _____
Tel _____
Email _____

1) I would like to support the Kent and Medway Medical School Campaign Fund

2(a) Regular gift (UK only)

I would like to make a regular gift to KMMS of £ _____
 monthly quarterly annually
Starting on the 3rd 15th of year

Please complete the Direct Debit Instruction below

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



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

Name and full postal address of your Bank or Building Society

To: The Manager of _____ Bank/Building Society

Address: _____

Name(s) of Account Holder(s): _____

Bank/Building Society account number

Branch Sort Code

Originator's Identification Number 6 9 4 1 4 5

Reference

Instruction to your Bank or Building Society

Please pay the University of Kent 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 University of Kent and, if so, details will be passed electronically to my Bank/Building Society.

Signature(s): _____ Date: _____

2(b) Single gift

I would like to give the following cash amount:

£100 £250 £500
 £1000 £2500 Other

I enclose a cheque/CAF voucher made payable to KMMS Development Fund

OR please visit the website: www.kmms.ac.uk

3) Please complete this Gift Aid section to make your gift go further

Please tick **one** of the following:

Yes, I am a UK taxpayer and I want the University of Kent to claim tax back on all donations I have made in the last four years and all future donations until I notify you otherwise.

OR

I am a non-tax payer

Date _____

The University of Kent is an exempt charity with HMRC No: XN5452

Canterbury Christ Church University is a registered charity with HMRC No: XN3265

4) Donor acknowledgment

Please list me/us in public acknowledgments, in the following way:

I/we wish to be an anonymous donor.

5) Legacy

Please tick here if you would like to receive information about including a gift to the Kent and Medway Medical School in your will.

6) Other gifts

Please tick here if you would like to be contacted to discuss making a gift of shares, property or land or other gifts to this fund.

7) Stay in touch

I am happy for the Kent and Medway Medical School to update me on their work, news, fundraising and events via:

Email Post Telephone SMS Text

The University of Kent will use the information you give us to contact you regarding the options you have selected above. You can opt out of receiving this information at any time and we will not use this data for any other purposes. We respect your privacy and further information can be found in our privacy statement at <https://alumni.kent.ac.uk/privacy>

8) Please return this form to:

Kent and Medway Medical School c/o Development Office,
University of Kent, Canterbury, Kent CT2 7NZ