



Aldenham
founded 1597

The Aldenham Annual Fund

Gift Purpose

I should like my gift to fund the following:

- Senior School Prep School The School
 Bursaries Sport Where the School needs it most

I agree that if it is not possible for my donation to contribute to the item of my choice then it can be used at the discretion of Aldenham School

Please tick this box if you would like your gift to remain anonymous

My Details

Title _____

Surname _____

First Name _____

Address _____

Post Code _____

Telephone No _____

Email _____

I wish to make a single donation please tick the appropriate box

By the enclosed cheque for the sum of £ _____ made payable to

Aldenham School General Charitable Trust.

OR

By Direct Transfer for the sum of £ _____ made payable to

Account Name – Aldenham School General Charitable Trust

National Westminster Bank PLC – 72-74 High Street, Watford WD1 2BQ

Account Number – 87438704 and Sort Code – 60-00-08

IBAN GB44 NWBK 6000 0887 4387 04

If you are paying by Direct Transfer please give your surname followed by your son's or daughter's name if they are a pupil at the school as a payment reference.

I wish to make a regular donation please tick the appropriate boxes

I would like to make a commitment of £ _____

Monthly Quarterly Annually

Starting on Day ____ Month _____ Year _____

This commitment is until further notice **OR** for a total of ____ payments

If you are making a regular donation please fully complete the Standing Order form opposite.

I wish to Gift Aid my donation

I am a UK tax payer and I wish all donations I make from the date of this declaration until I notify you otherwise, to be effective under the Gift Aid Scheme. Higher rate tax payers can claim further tax relief on their self assessment tax return.

Signature _____

Date _____

Please return the completed Donation Form, and if applicable Standing Order Form, along with any cheques in the enclosed FREEPOST envelope to: The Development Office, Aldenham School, Elstree, Hertfordshire WD6 3AJ

Standing Order Form

Please complete all details using **BLOCK** capitals and tick the appropriate boxes

YOUR BANK DETAILS

To _____ Bank/Building Society

Address _____

Postcode _____

Account Number _____

Sort Code _____

Name of Account Holder(s) _____

PLEASE PAY

Account Name – Aldenham School General Charitable Trust

National Westminster Bank PLC – 72-74 High Street, Watford WD1 2BQ

Account Number – 87438704 and Sort Code – 60-00-08

THE SUM OF £ _____ Monthly Quarterly Annually

Starting on Day ___ Month _____ Year _____

until further notice **OR** for a total of ___ payments

NAME AND ADDRESS OF ACCOUNT HOLDER(S)

Title _____

Surname _____

First Name _____

Address _____

Post Code _____

Signature _____

Date _____

For further information about the school's fundraising activities
please contact Molly Barton – Development Manager on:
Telephone +44(0)1923 851612
Facsimile +44(0)1923 854410
Email development@aldenham.com

Aldenham School General Charitable Trust – Registered Charity No 1062393

The Aldenham School Company is a company limited by guarantee registered
in England and Wales Number 1847134 and a Registered Charity Number 298140
Registered Office: Brewers' Hall, Aldermanbury Square, London EC2V 7HR