





Giving – My Response

I want to play my part in the life of St Nicolas through what I am able to give financially. Here is my considered response to the church's upcoming needs and opportunities.

| I am able to: |
|--|
| ☐ change my regular giving to a total of £ each month / year |
| ☐ start giving f each month / year |
| ☐ make a one-off contribution of £ |
| \square I would like some information about how I could leave a gift to our church in my will, to help me understand how legacies fi into Christian stewardship and what a difference my gift could make. |
| Please fill in either or both of the other forms on this page as appropriate. In completing this sheet you consent to your personal data being stored and processed electronically or manually by St Nicolas Church. |
| Signed |
| Name |
| Date |
| Email |
| Please return this sheet to the church office, addressed to the |

Please return this sheet to the church office, addressed to the Stewardship Secretary. Thank you!

St Nicolas Church, Newbury Registered Charity No: 1128145

Gift Aid Declaration

| Your Full Name | | |
|--|---|--|
| Address | | |
| | | |
| | Post Code | |
| | I want the church to reclaim tax on all donations I have made within the last four years and until further notice. | |
| | I note that I should tell the church if I do not pay an amount of tax that at least equals the tax deducted from this donation. | |
| Signed | | |
| Date | | |
| I would like to make my donation by: | | |
| ☐ the envelope scheme | | |
| ☐ bank standing order | | |
| □ cheque | | |
| Thank you! | | |
| This form | is confidential. Please address any queries to: | |
| The Stewardship Secretary St Nicolas Church West Mills Newbury, Berks RG14 5HG | | |
| stewardship@st-nics.org | | |

Bank Standing Order

| To the Manager Bank plc |
|---|
| Address |
| |
| Post Code |
| Please pay St Nicolas Newbury PCC at Lloyds Bank Plc, 5 Bridge Street, Newbury, RG14 5BQ Sort Code 30-95-89 Account Number 00294948 |
| the sum of £ (figures) |
| (words) |
| commencing on(starting date) |
| and the same sum every month / quarter / year until further notice. (delete as applicable) |
| ☐ This order cancels the instructions in favour of the above Parochial Church Council next payable on / / |
| Signed |
| Date |
| My Address |
| Post Code |
| My Account Name |
| My Account Number |
| My Sort Code |