

Donate to Jami

Personal details

Title _____ First name _____ Last name _____

Address _____

Postcode _____

Email _____

Telephone _____

Stay in touch

We would love to stay in touch and let you know about our vital services, our education work, events and fundraising. Your privacy is important to us and we need your consent in order to communicate with you.

I consent to Jami contacting me by: post email phone

I confirm that I am consenting to Jami holding and processing my personal data to keep me informed about Jami's services, courses, events and fundraising.

Signature _____ Date DD / MM / YYYY

Where you do not grant consent, we will not be able to use your personal data; (so for example we may not be able to let you know about forthcoming services and events) except in certain limited situations, such as where required to do so by law or to protect members of the public from serious harm. You can find out more about how we use your data and how to withdraw your consent from our Privacy Notice which is available from our website www.jamiuk.org/privacy

Payment details

Jami is 98% voluntary funded and we rely on your kind donation to deliver our essential services to the community.

£10 £25 £50 £75 £125 £250 £ _____
Other

I enclose a cheque charity voucher (payable to Jami UK)

Please debit my MasterCard Visa CAF Card Amex

Name on card _____

Card number

Expiry date / 3/4 digit security number:

giftaid it Make my gift worth 25% more with Gift Aid

I wish Jami to treat all donations in the last four years, this gift and all future donations that I make, as Gift Aid donations. I confirm I have paid or will pay an amount of Income Tax and/or Capital gains Tax for each tax year that is at least equal to the amount of tax that all the charities and Community Amateur Sports Clubs (CASCs) that I donate to will reclaim on my gifts for that tax year. I understand that other taxes such as VAT and council tax do not qualify, and that the charity will reclaim 25p of tax on every £1 that I give.

Signature _____

Date _____

Please return this form to:

Jami, Martin B. Cohen Centre for Wellbeing, Gould Way, Edgware HA8 9GL



The Mental Health Service for our Community

Registered Charity 1003345. A Company Limited by Guarantee 2618170.