



## DONATION GIFT AID FORM

Full Name

Home address  
and postcode

### Gift Aid declaration

☐ Please tick if applicable

I would like to Gift Aid any donations I make in the future or have made in the past four years to **CCHS Capital Development Limited** or **Chelmsford County High School for Girls**, until notified otherwise.

I declare that I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year then it is my responsibility to pay any difference.

Any donations in the past four years and in the future made by me to CCHS Capital Development Limited or Chelmsford County High School for Girls in return for which I receive no direct benefits, services or favours, shall be treated by the Charities as a Gift Aid donation.

If I cease to be a taxpayer I will notify the Charity, to withdraw this declaration.

**Signature:**

**Date:**

**Please return completed forms to:**

Mrs Fiona Gilmour, Finance Department  
Chelmsford County High School for Girls  
Broomfield Road, Chelmsford  
Essex CM1 1RW