



LYRIC CAPITAL CAMPAIGN – GIFT FORM

Title _____ Forename _____ Surname _____

Address _____

_____ Postcode _____

Phone (home) _____ (work) _____

Mobile _____ email _____

➤ I am/we are pleased to gift a total of £ _____ to the Lyric's campaign

➤ I am happy for you to list my/our name/s as a campaign supporter YES / NO

Signed _____ Date _____

Please choose one of the following options and also tick the Gift Aid declaration if appropriate:

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would like to Gift Aid my donation Taxpayer's name Date

I am a UK taxpayer and consent to the Lyric Theatre claiming Gift Aid on my behalf on all qualifying donations since 6 April 2000, and all donations from the date of this declaration until further notice. I understand that I must pay an amount of UK income tax or capital gains tax equal to the tax deducted from my donation.

OPTION A I wish to pay in one lump sum:

BY CHEQUE (made payable to Lyric Theatre NI Development Fund).

OPTION B

I wish to pay my gift via instalments by Standing Order as follows:

Standing Order Declaration	
To The Manager of (your bank name)
Address	Postcode
Please pay to: Bank of Ireland, University Road, BELFAST BT7 1NH	
The sum of _____ annually / quarterly / monthly for ____ years or until further notice	
For the credit of Lyric Theatre NI Development Fund Sort Code 90-02-95 Account Number 87475673	
Please make the first gift on __ / __ / __ (This should be at least one month ahead of today's date)	
My Account Name	Account No. Sort Code
PLEASE DO NOT SEND THIS TO YOUR BANK. PLEASE RETURN THE ENTIRE FORM TO: DEVELOPMENT OFFICE, LYRIC THEATRE, 88A STRANMILLIS ROAD, BELFAST BT9 5AD.	

The Lyric Theatre (NI) is a registered charity. Charity No: XN 47868

OFFICE USE ONLY: Donor ID _____ Date received _____ Date processed _____ Processed by _____