

CAF American Donor Fund

Account opening form *please print legibly*

Donor details

<input type="text"/>	<input type="text"/>	<input type="text"/>
Title	Forename(s)	Surname
Residential address:		
<input type="text"/>		
Residential address:		
<input type="text"/>		
City:	County/State:	
<input type="text"/>	<input type="text"/>	
Postcode/Zip code:	Country:	
<input type="text"/>	<input type="text"/>	
Daytime telephone:	Email:	
<input type="text"/>	<input type="text"/>	
Your date of birth	<input type="text" value="dd / mm / yyyy"/>	

Please note that we must have your **full name, home address and date of birth** to assist us to comply with Money Laundering Regulations. **Please attach a copy of your passport or other photo-ID for our records.** We will contact you if we require any further information. These measures are in place to help protect you and us from financial crime.

Your personal information will be held in the United Kingdom by CAF American Donor Fund and will not be passed on to any third party for purposes other than to administer your account or donation.

Postal address (if different):	
<input type="text"/>	
Postal address (if different):	
<input type="text"/>	
City:	County/State:
<input type="text"/>	<input type="text"/>
Postcode/Zip code:	Country:
<input type="text"/>	<input type="text"/>

Please select the product you wish to use by ticking one of the three boxes below:

- Donor Advised Gift (this is the default product) **OR**
 Donor Advised Fund **OR**
 Donor Advised Trust

Please refer to the reverse of Gift Form for the terms and conditions which apply to each product.

You can also find out more about the options available to you by visiting www.cafonline.org/americanonorfund

I have read and agree to the product terms and conditions (see reverse of Gift Form). I understand that my gift to CAF American Donor Fund becomes the property of CAF American Donor Fund and that CAF American Donor Fund has ultimate control, authority and discretion with regards to its assets. I further understand that all grants made by CAF American Donor Fund are at its sole and independent discretion. I confirm that I will receive no tangible benefit in return for my support of CAF American Donor Fund or any other entity in the CAF Group.

Sign

Date

We would like to contact you with additional information about the CAF American Donor Fund that we think may be of interest to you. Please tick here if you would prefer not to be contacted in this way.

We would also like to tell you by letter, phone or email about additional products and benefits from the CAF group that we believe will be of interest to you. If you would prefer not to be contacted, please tick here.

CAF and the companies in which it has a majority stake (the group) will not share your information with any outside organisation except as part of providing a product/service or when legally obliged to do so.

Please make copies of this form if needed.

Please send the form to: **The Manager, CAF American Donor Fund, 25 Kings Hill Avenue, West Malling, Kent, ME19 4TA**
Tel: +44 (0)1732 520 150 Fax: 01732 520 160 Email: cadf@cafonline.org www.cafonline.org/americanonorfund