

CAF GIVE AS YOU EARN[®]

Payroll Registration Form

If you have any questions when completing this form, or you require additional Payroll Registration Forms please contact a member of CAF Customer Services on 03000 123 000 or giveasyouearn@cafonline.org

Please complete a separate Payroll Registration Form for each payroll you wish to be included in your CAF Give As You Earn Service.

This form can be used to register additional payroll centres within your organisation, so long as Employees are officially contracted with the Customer organisation. If Employees are officially employed by a subsidiary of the customer, the subsidiary is classed as a separate legal entity and you should complete a separate CAF Give As You Earn Application Form.

Please indicate how you are using this form:

- To register a new payroll under a **new** CAF Give As You Earn Service. Please attach this form to your CAF Give As You Earn Application Form and submit together
- To register a new payroll under an **existing** CAF Give As You Earn Service. Please provide the CAF Give As You Earn agreement number (if known):
- To **update** information relating to a payroll that already forms part of your CAF Give As You Earn Service. Please provide the following information (if known):
- CAF Give As You Earn agreement number
- CAF Give As You Earn payroll number

Section 1 Employer details

Organisation name

Please complete one of the following as most appropriate:

- Registered company number
- Registered charity number
- Other – please provide details:

Registered address

Postcode

Website

Main telephone number

Parent organisation (if applicable)

Website

This is your main corporate website.

Parent organisation

If your organisation is part of a wider group, please list the main parent organisation.

CAF use only Agreement/contract number

Payroll number

Section 2

Your payroll

2.1 Payroll contact details

Please provide us with the details of the person you would like us to use as the main contact for communications relating to this payroll. If the main contact is the same as specified on your original CAF Give As You Earn Application Form, please tick the appropriate box and skip to section 2.2.

Please indicate if you would also like this contact to be a Contact Administrator (authorised to add and/or remove contacts relating to this Service) or a Service Administrator (authorised to add and/or remove contacts relating to this Service and set up new Services on behalf of the Customer).

2.2 Payroll details

Number of Employees

An approximation is sufficient.

Tax district

This is the HMRC tax district under which your organisation is registered.

2.3 Third Party

Please call CAF Customer Services on 03000 123 000 or email giveasyouearn@cafonline.com to request a Third Party Notification Form which needs to be completed and submitted alongside this application form.

2.1 Payroll contact details

Same as the payroll contact in section 3.1 of your CAF Give As You Earn Application Form

Mr Mrs Miss Ms Other

Full forename(s)

Surname

Job title

Work address Same as the organisation's registered address

Other (please specify)

Postcode

Work email address

Work telephone number

Contact Administrator Service Administrator

Identification details

Please provide the following details for any user authorised as a Contact Administrator or Service Administrator.

Date of birth

Home address

Postcode

2.2 Payroll details

Please indicate the frequency and date of your payroll by ticking the appropriate option and providing the date of your first Employee Donation:

Weekly
 Monthly
 Lunar/4 week cycle

Starting from

Number of Employees

Please indicate how many Employees are paid on this payroll

HMRC references

Please provide details of PAYE and tax references, where appropriate:

PAYE reference

Tax district

2.3 Third Party

If you use one or more of the following third party organisations please tick all which apply below and see guidance notes to the left. If not, please skip to section 3.

- subsidiary company/branch
- payroll bureau/processing agent
- professional fundraising organisation
- technology service provider (including a flexible benefits provider)

Section 3

Paying fees

Full details of fees can be found in the CAF Give As You Earn Fee Schedule.

Paying fees from Employee Donations

Where fees are taken from Employee Donations, this will either be from the Employee Donation itself, the Participating Employee's CAF Charity Account or the CAF Staff Charity Fund, as appropriate.

*Please complete a CAF Company Account Application Form and attach to this form. You can download the CAF Company Account Application Form from www.cafonline.org/companyaccount, or request a copy by calling 03000 123 000 or emailing companyaccounts@cafonline.org

Many employers choose to pay CAF Give As You Earn fees on behalf of their employees. Otherwise, they are taken from the Employee Donation. You can choose from one of three options:

- Pay all fees
 - Pay all fees with a cap of £10 per Employee Donation per pay period.
Any outstanding fees will be taken from the relevant Employee Donation.
 - Do not pay any fees (in which case they will be taken from the Employee Donations).
- If you have opted to pay any part of the fees (options 1 or 2 above), please indicate how you would like to make the payment:

- Fees should be taken from an existing CAF Company Account.

Please specify account number

- Fees should be taken from a new CAF Company Account*

- You wish to be invoiced quarterly for fees

If you have indicated that you would like to be invoiced for fees, please specify an invoicing contact below:

- Same as the payroll contact specified in section 2.1 of this form
- Someone other than the payroll contact – please specify below

Mr Mrs Miss Ms Other

Full forename(s)

Surname

Job title

Work address Same as the organisation's registered address

Other (please specify)

Postcode

Work email address

Work telephone number

Section 4 Certification

The form must be signed by **one of the following individuals:**

- An existing user authorised as a Service Administrator
- Company: **Director**
- LLP or other partnership: **Partner**
- Charity/Trust: **Trustee***
- Other non-incorporated organisation: **Chief Executive or equivalent***

If it is signed by someone other than the authorised signatory specified above, please enclose evidence of their authority to sign on behalf of your organisation. This should be either an original document or a certified copy of the original.

A certified copy of a document is one which has been certified on every page as a true copy of the original by a suitable certifier and contains the following:

- the name, signature, position and regulatory number (if applicable) of the suitable certifier
- a statement to the effect that the document is a true copy of the original
- the date on which the document was certified

Who can certify your documents?

- A notary public
- A Solicitor or barrister who's licensed to work in the UK
- A bank employee, stockbroker, IFA or an accountant from a firm that's regulated by the Financial Conduct Authority
- An authorised representative of the embassy or consulate that issued your ID
- The Post Office, for a small fee

If the certifier is working in a professional practice or regulated position (as listed above) they must be independent of the person for who they are certifying.

*If your constitution requires more than one signature, please provide these with title, full forename, surname and job title on a separate sheet and arrange for the individual(s) to sign the form.

If you need any further guidance to help you complete this form, please contact us on **03000 123 000** or email giveasyouearn@cafonline.org

Please read each of the statements below.

By signing this Payroll Registration Form, we, the Customer, confirm that:

- we agree to purchase the Services as set out in the CAF Give As You Earn Service Schedule and we accept the CAF Services for Companies Terms and Conditions
- if there was anything that we did not fully understand, we have sought professional advice and guidance before sending this completed form to CAF
- the individuals detailed on this form have authorised the disclosure of their personal details to CAF
- the information given in this registration form is accurate
- we are responsible for updating CAF if contact details, access privileges or third parties change (including if an individual is no longer employed by the Customer)

Signed for and on behalf of the Customer:

Mr Mrs Miss Ms Other

Full forename(s)

Surname

Job title

Authorised signatory

Date d d / m m / y y y y

Next steps

You will receive an email confirmation once CAF have accepted your application. No binding agreement shall exist until CAF sends the Customer email confirmation of the acceptance of the application.

If you wish to match Employee Donations, please also complete and submit an Organisation Registration Form, unless you have already done so and there are no changes to the information. Please call CAF Customer Services on **03000 123 000** if you need to obtain a copy of your Organisation Registration Form or would like to check the information you submitted previously.

Once completed and signed, please return the form by email to giveasyouearn@cafonline.org. Please keep a copy for your future reference.

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