

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Post Code: \_\_\_\_\_

Daytime Tel: \_\_\_\_\_

Email: \_\_\_\_\_

By giving us your email address, you are giving us consent to contact you in this way.

## Method of Payment

I enclose a cheque/postal order to the value of £ \_\_\_\_\_

**(payable to The Hospice of St Francis)**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

## If you prefer to pay by credit/debit card, please fill in this section

Name on card (Block Capitals) \_\_\_\_\_

Visa  Visa Electron  Mastercard  Maestro  Delta  Solo

Credit/Debit card Number: 

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Expiry Date: \_\_\_\_\_ Start Date: \_\_\_\_\_ Maestro Issue No: \_\_\_\_\_

Security Code: \_\_\_\_\_ (last three digits on back of card)

Cardholders Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Use Gift Aid and you can make your donation worth more.

For every £1 you give us, we get an extra 28p from the Inland Revenue at no extra cost to you. **So just tick below - it's that simple.**

*"I want all donations that I have made to the Hospice of St Francis in the last six years prior to this date and all future donations, to be GiftAided until further notice."*

I have paid UK Income and/or Capital Gains Tax at least equal to the tax that will be claimed on donations made in each tax year. **Please note that you must advise us if your tax status changes.**

(Please tick) **Date:** \_\_\_\_\_ **If you are NOT a taxpayer, please tick here**

**Please return your form to: Fundraising, The Hospice of St Francis, Spring Garden Lane, Off Shootersway, Shootersway, Berkhamsted, Herts. HP4 3GW.**

We promise not to sell your details to anyone else. From time to time, the Hospice of St Francis would like to send you information about our work. If you would prefer us not to use your details in this way, please tick here