

FRIENDS OF THE HOSPICE

I wish to join the Friends of Dr. Kershaw's Hospice and make a monthly/quarterly/annual* subscription/donation of:

(* please delete as appropriate)

Please fill in the amount you wish to donate:

£10	£20	£30	£40	£Other

I am a UK taxpayer and want the Oldham Hospice to treat all my donations from the date on this declaration, until I notify you otherwise, as Gift Aid donations and to claim back the tax on my gift. My tax bill this year will be more than the donation. (Please delete this paragraph if you are not a UK taxpayer.)

Name:

Address:

Postcode:

Tel. No: Signature: Date:

Friends of Dr. Kershaw's Hospice STANDING ORDER MANDATE

Please complete your bank or building society details below:

To the Manager: Bank / Building Society

Branch address:

.....

Postcode:

Please pay: **Dr. Kershaw's Hospice**

Sort Code: **01 - 07 - 50**

Friends of Dr. Kershaw's Hospice

Account No: **30586518**

The sum of £ Amount in words:

Commencing date: and payable monthly / quarterly / annually*
thereafter (*please delete as appropriate)

Please quote Reference (For Office Use Only)

Until further notice in writing or until and debit my / our account accordingly

Please complete this mandate, send it to our Appeal Office for processing and we will forward it to your bank/building society.

Name of account to be debited:

.....
Name(s)

Address

Postcode

Bank Sort Code.
Account No.

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Signature

Signature

For joint accounts where both signatures are required

Date