

LUAL Dedication Form

Our annual Light Up a Life Service will take place on Thursday 1 December from 7pm at St Joseph's Hospice. The Tree of Remembrance will be illuminated during the service.

To dedicate a light on the tree, please complete this form and return to **St Joseph's Hospice, Mare Street, Hackney, London E8 4SA**

Your Details	
Name:	
Contact address:	
Postcode:	
Tel:	Email:

I would like to sponsor a light in memory of: _____

A dedication card with your message will appear on our Memory Wall during Light Up a Life. If you do **not** wish for a card to appear on the Memory Wall, please tick here

Donation to St Joseph's Hospice	
I would like to make a donation of £_____	
<input type="checkbox"/> Cheque: I enclose a cheque for £_____ made payable to "St Joseph's Hospice"	
<input type="checkbox"/> Credit Card: Please debit £_____ from my credit/debit card.	
Card number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Valid from <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>	Expiry date <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>
Issue number <input type="text"/> <input type="text"/>	Security No. <input type="text"/> <input type="text"/> <input type="text"/>
Name on card (as it appears on the credit/debit card) _____	
Address (if different from above) _____	

Gift Aid it:

Using Gift Aid means that for every pound you give, we get an extra 25 pence from the Inland Revenue, helping your donation go further, at no cost to you. To enable us to claim Gift Aid on your donation, please tick the following declaration and sign below.

I am a UK taxpayer and would like St Joseph's Hospice to claim Gift Aid on all donations I have made in the last four years and all future donations until I notify you otherwise. I understand that I must have paid an amount in income/capital gains tax at least equal to the amount donated in the appropriate tax year (6 April one year to 5 April the next).

Signature: _____

Date: __ __ / __ __ / __ __