St Joseph's Hospice

Donation form

My details

Title: First name:

Surname:

Address:

Postcode:

Telephone:

Email:

Data Protection

From time to time, St Joseph's Hospice would like to keep you informed about our work and how your donations are helping. Please note that we will NOT pass your details on to other charities or organisations.

☐ Yes, please contact me by Email

☐ No, please do not contact me by Post

Donation

I would like to donate £_____

- In Memory of _____
- On behalf of _____
- Other _____

☐ By cheque or CAF voucher
(made payable to St Joseph's Hospice)

☐ Please debit my Credit/Debit Card

My card details are as follows

☐ Visa

☐ Mastercard

☐ CAF Charity Card

Card Number:

Expiry Date: Valid From:

Signature: _____

Date: ____ / ____ / ____

Use GiftAid and you can make your donation worth more.

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For every £1 you give us, we get an extra 25p from HMRC at no extra cost to you.
So just tick below - it's that simple.

☐ I want to Gift Aid my donation and any donations I make in the future or have made in the past 4 years to St Joseph's Hospice. I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference.

☐ No, I'm sorry I cannot Gift Aid

Signature: _____ Date: ____ / ____ / ____

Please post to: Freepost RTKZ-XJHL-KGBG, St. Joseph's Hospice, Mare Street, London E8 4SA

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