

Make each day count

Donation form

Mr Mrs Ms Miss Other:

First name:

Last name:

Address:

Postcode:

Telephone:

Mobile:

Email:

Is your donation in memory of someone? Yes No

If yes, please state name:

We would like to keep you updated with news and fundraising activities.

If you would prefer not to receive this information please tick here

If you would like to receive this information by email please tick here

We will hold your personal information in accordance with the Data Protection Act 1998 and we will not pass on your personal information to third parties.

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If you Gift Aid your donation we can claim back 25p for every £1 you donate, helping your donation to go further at no extra cost to you.

I am a UK taxpayer and would like all donations I have made to St Elizabeth Hospice, Suffolk in the last four years and all donations in the future to be Gift Aided until I notify you otherwise

You must pay an amount of Income Tax and/or Capital Gains Tax at least equal to the tax that St Elizabeth Hospice, Suffolk reclaims on your donations in the tax year.

Option 1 – Single donation



- **£20** could help to provide 30 minutes of complementary therapy, such as massage or aromatherapy
- **£50** could help to provide 30 minutes of occupational therapy, helping a patient to maintain their independence
- **£140** could help to provide a home visit by a Hospice at Home health care assistant, providing specialist care in the patient's own surroundings

I wish to make a donation of:

£20 £50 £140 Amount of my choice:

Please make your cheque or postal order payable to St Elizabeth Hospice.

Or please debit the above amount from my

Mastercard Maestro Visa Other:

Name on card:

Card number:

Valid from: / Expires: / (Maestro only)

Issue number: (Maestro only)

We will telephone you for the security code on the reverse of your card.

Signed:

Date:

You can also donate online, please visit www.stelizabethhospice.org.uk

Make each day count

"During the time Mary spent at the Hospice her spirit was never broken; the support and care she received from the staff was second to none. It made the whole family appreciate the importance of our local Hospice and making sure there is funding in place to ensure other people can benefit as Mary did. By making a regular donation, I am playing my part in ensuring the future care of others in the same situation as Mary." Ted



Please return this form to: Fundraising Team,
St Elizabeth Hospice, 565 Foxhall Road, Ipswich, IP3 8LX

Please detach the Direct Debit Guarantee below and keep this in your records.

Donation form continued

Option 2 – Regular donation by Direct Debit

I would like to make a regular monthly donation of:

£3 £5 £10 Amount of my choice:

Starting on the: 1st 15th

Month Year



Instruction to your Bank or Building Society to pay by Direct Debit



Please fill in the form and send to St Elizabeth Hospice, 565 Foxhall Road, Ipswich IP3 8LX.
Name and full postal address of your Bank or Building Society

To the Manager: Bank or Building Society

Bank address:

Postcode:

Name(s) of Account Holder(s):

Branch Sort Code:

Your account number:

Service User Number:

5 5 9 7 6 4

Reference:

Instruction to your Bank or Building Society

Please pay St Elizabeth Hospice, Suffolk Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit guarantee. I understand that this instruction may remain with St Elizabeth Hospice, Suffolk and, if so, details will be passed electronically to my Bank/Building Society.

Signature(s):

Date:

Banks and Building Societies may not accept Direct Debits for some types of account.

This guarantee should be detached and retained by the payer.

The Direct Debit Guarantee

This guarantee is offered by all bank and building societies that accept instructions to pay Direct Debits.

If there are any changes to the amount, date or frequency of your Direct Debit, St Elizabeth Hospice, Suffolk will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request St Elizabeth Hospice, Suffolk to collect a payment, confirmation of the amount and date will be given to you at the time of the request.

If an error is made in the payment of your Direct Debit, by St Elizabeth Hospice, Suffolk or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society. If you receive a refund you are not entitled to, you must pay it back when St Elizabeth Hospice, Suffolk asks you to.

You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.