

# St Vincent's Hospice Donation Form

## Your Personal Details

Title _____	First Name _____	Surname _____
Address _____		Postcode _____
Phone _____	Email _____	

## Donation Information

I wish to make a gift of £ _____
Reason for Gift _____
_____

## Payment Information

We want to make this as easy as possible for you. To give by cheque, postal order or charity voucher **please make payable to St Vincent's Hospice** and post to the Fundraising Team.

Cardholder's Name \_\_\_\_\_

Credit Card Number

Card Type Switch  Maestro  Visa (not electron)  MasterCard  Amex

Valid From \_\_\_\_/\_\_\_\_/\_\_\_\_ Expiry Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Issue No \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

<p style="text-align: center;"><i>giftaid it</i></p> <p>I confirm that I am a UK tax payer <input type="checkbox"/> I wish St Vincent's Hospice to reclaim tax on all my donations over the past four years and all donations I make from the date of this Gift Aid Declaration until I notify you otherwise. I understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all of my donations in that tax year, it is my responsibility to pay any difference. We will reclaim 25p of tax on every £1 that you have given. Please tell us if you: no longer pay sufficient tax on your income and/or capital gains, change your name or home address or want to cancel this declaration.</p>
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## Contact Consents

Your support helps us continue our work, and we'd love to keep you posted with our news, activities and appeals. Your details will only be used by St Vincent's Hospice. We will never give your information to other organisations to use for their own purposes. You are free to change your mind at any time.

Please tell us if you would be happy for us to contact you:

Email  Post  Phone  Text