Pledge your support today



Donation

Please complete the form in block capitals.

Mr/Mrs/Miss: Address:
Postcode:
I would like to make a donation of: £100 £50 £20 £10 £5 Other £ Please make your cheque, postal order or CAF voucher payable to: Saint John of God Hospitaller Services.
Regular Giving
By completing the following section, your bank or building society will pay us automatically. You can give monthly, quarterly or annually. Mr/Mrs/Miss:
Address:
Postcode:
Please pay to: Saint John of God Hospitaller Services Bank Name: Barclays Sort Code: 20-25-52 Account No: 60124249
The sum of (amount in words)
each month / quarter / year (delete as appropriate) until further notice and debit my account.
Account Number: Sort Code: - </td
Signature:
To the manager, (bank name and address) Postcode:

Please return the whole of this form to: SJOG Hospitaller Services Yarn, Lingfield House, Lingfield Point, Darlington, Co. Durham, DL1 1RW

Pledge your support today



Gift Aid Declaration

If you are a UK tax payer, we can increase your gift at no extra cost to you by reclaiming the basic rate of tax from HM Revenue and Customs. For example if the basic rate of tax is 20%, this means that if you give £10 using Gift Aid, it's worth £12.50 to the charity. If you would like us to do this, all that is needed is for you to complete the section below.

Mr/Mrs/Miss:
Address:

......Postcode:

Declaration

I would like Saint John of God Hospitaller Services to treat all donations I have made since the 6th April 2005, and all donations I make from the date of this declaration until further notice, as gift aid donations.

Please tick if you do not wish to be included on our mailing list.

Further Information

Publications

Please tick if you would like to receive regular (free) copies of the charity's newsletters and reviews, complete your details below.

Legacies

Please tick if you would like to receive further information about leaving a legacy to the charity in your Will.

Mailing List

] If you wish to be deleted from our mailing list, please tick this box and complete your details below.

Name:	
A data a se	
	Postcode:
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