

Take

Time to Remember

someone special



Your Details (Please print in Capitals)

Title First Name Last Name
Address
Postcode Telephone Number
(in case of queries)
Email Address

Yes! I would like to take 'Time to Remember':

Name of loved one:
Special day Date

Please note that your special day will be celebrated on our website for twelve months.

I would prefer to make a donation in support of the Time to Remember campaign

If you would prefer not to receive a letter of acknowledgement please tick box

Office only: Date rec'd Amount MOP Initials Source TTRNWS

Gift Aid Declaration, increase the value of every £1 you donate by 28p, at no cost to you

(please tick the box) **Yes! I am a UK tax payer*** and I would like Douglas Macmillan Hospice to treat all donations I have made for the 4 years prior to this year, and all other donations I make in the future as Gift Aid, until I notify you otherwise

Title First Name Last Name Date

You must pay an amount of income or capital gains tax in the UK (eg work earnings, occupational or private pension, savings) equal to the money we can claim on your donations in the tax year. The hospice can currently claim 25p for every £1 you donate from HM Revenue and Customs

Donation Details

Donation amount £ : Date

Cash (Please do not post, hand deliver only)

Cheque (Please make payable to 'Douglas Macmillan Hospice' and write your name and address on the reverse)

Mastercard **Visa** **Maestro**

Name as it appears on the card Signature

Cardholders address (if different from above)

Postcode

Please allow up to 21 days for your donation to be processed.

Card Number

Start Date / Expiry Date / Issue Last 3 digits on signature strip

This section will be securely destroyed once payment has been taken

PLEASE RETURN THIS FORM TO:

'A Time to Remember', Douglas Macmillan Hospice, Barlaston Road, Blurton, Stoke on Trent ST3 3NZ

Registered Charity Number 1071613