

Donation form



St. Richard's
Hospice
CARING FOR LIFE

1 Your details

Title: First name: Surname:

Address:

Postcode:

Phone: Email:

2 Your donation

Donation amount: Cash: Cheque: Card: Please make cheques payable to St Richard's Hospice or enter your debit or credit card details below:

Would you like to dedicate your donation to a specific service or area?
In-patient Unit: Living Well Services: All hospice care and support:
Family Support: Community nursing:

Reason for donation:

Mastercard: Visa: Switch: CAF:

Card Number:

Valid From: / Expiry Date: / 3 digit security no:

Card holder's name: Card holder's signature:

We do not store card details nor do we share your financial details with any third parties outside of essential processing

3 Gift Aid

Add 25% more to your donation at no cost to you. declaration allows St. Richard's Hospice to claim tax back on eligible donations. It means that for every £1 you donate to St. Richard's Hospice we can claim back 25p, at no extra cost to you.

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Yes, I confirm I am a UK taxpayer and would like all my donations to St. Richard's Hospice made now, in the past four years and in the future to be treated as Gift Aid donations

Please remember to let us know if your tax status, name or address change or if you wish to cancel your Gift Aid declaration

Signed: Date:

4 Contact Preferences

Please tick the boxes below to indicate your preferences on how you want to hear from us.

Email: Telephone: I already receive information: I do not wish to be contacted:

Your information is held in a secure manner and we do not share your information with third parties, except for essential payment processing. You can at any time update your communication preferences with us by contacting the Fundraising Department.

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St Richard's Hospice is largely dependent on voluntary donations and gifts in Wills