Regular Giving Donation Form

Please complete the form below:

Princess Alice Hospice

1 Name (Mr/Mrs/Miss/Ms)

Address

Postcode

Tel/Mobile Email

2 If you would like to make this donation in memory of someone, please enter their name here:

3 I/We wish to make a monthly gift of ☐**£5** ☐**£8** **Other £**

4 I would like the payments to be taken from my account on ☐**1st** ☐**15th** month

(Please make the start date at least one month from today)

5 Please fill in the Direct Debit form below:

Instruction to your bank or building society to pay by Direct Debit

DIRECT Debit

Please fill in this form and send to: Princess Alice Hospice, FREEPOST RTJU-EACR-CZEH, West End Lane, Esher, KT10 8NA

Name and full postal address of your bank or building society

To:The Manager

Bank/building society

Postcode

Name(s) of Account Holder(s)

Bank Sort Code

Bank/Building Society Account No.

Banks and building societies may not accept Direct Debit Instructions from some types of account.

Service User Number

4	4	0	6	1	9

Reference (for office use only)

Instructions to your bank/building society:
Please pay Princess Alice Hospice 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 Princess Alice Hospice and, if so, details will be passed electronically to my bank/building society.

Signature(s)

Date

6 **Gift Aid** makes your gift worth **25% more** at no extra cost to you.
Simply tick **one** box below, date and sign your declaration.

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☐ I want to Gift Aid my donation and any donations I make in the future or have made in the past 4 years to Princess Alice Hospice (1010930).

I am a UK taxpayer and understand that if I pay less Income Tax and / or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year, it is my responsibility to pay any difference.

Please date this declaration: **Date:** ☐☐-☐☐-☐☐

☐ I am not a UK taxpayer.

Print Name: **Signed:**

7 **Keeping In Touch**

We'd love you to be part of the Princess Alice Hospice supporter community, but if we don't have your permission, we can't get in touch with you to share our latest news, campaigns and information about how you can support our work.

Would you like to hear from us by email? ☐ **Yes** ☐ **No**
Would you like to hear from us by post? ☐ **Yes** ☐ **No**
Would you like to hear from us by phone? ☐ **Yes** ☐ **No**

Rest assured, we never share, swap, rent or sell our supporters' details to other charities or third parties for marketing purposes. You can read how we manage and respect your data in our Supporter Privacy Notice at **www.pah.org.uk/privacy**. If you'd like to change your permissions at any time please contact our supporter care team on **01372 461808** or **supportercare@pah.org.uk**.

8 Please return this donation form to the FREEPOST address below.
Princess Alice Hospice, FREEPOST RTJU-EACR-CZEH, West End Lane, Esher, KT10 8NA

9 Please print off and retain the Direct Debit Guarantee below for your records.

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