

BENI DONATION FORM

Make a one off or regular gift today

Here's my gift to help keep the Maison de Benediction open and provide life-saving care to children in need:

Title _____ Forename(s) _____ Surname _____

Address _____

Postcode _____ Email _____

I wish to make a Single Monthly donation for the amount of £ by:

Cheque (made payable to Hope Health Action)

Credit/Debit Card (please provide card details below)

Card type Visa MasterCard Maestro/Switch Credit Debit CAF Charity Card

Card number - - - Maestro/Switch only

Start date - Expiry date - Issue number Maestro/Switch only

Signature

Date

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Please complete this section if you are a UK taxpayer and wish to boost your donation by 25p for every £1 you donate.

I am a UK taxpayer and I understand that if the Gift Aid claimed on this donation is more than the tax I pay in the current tax year (on my income and/or capital gains), it's my responsibility to pay the difference.

Gift Aid my donations

Please notify us if you wish to cancel this declaration, have changed name or home address, or no longer pay sufficient tax on your income and/or capital gains. Higher rate tax payers can claim further tax relief through their Self Assessment tax return.

Print name

Date

Please tick this box to cover the 5% transaction cost so that we receive 100% of your donation

Tick this box if you wish to receive our monthly email newsletter

Tick this box to stop all postal communications from Hope Health Action

Please return this whole form with your gift in the envelope provided to Hope Health Action, 25 Coney Hill Road, West Wickham, BR4 9BU. Or you can give securely online at hopehealthaction.org/benisponsorship by scanning this QR code or by calling us during office hours on 0208 462 5256. Thank you.



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