

Yes! I would like to make a single gift to Sue Ryder Care

£15 £25 £50 or my preferred amount £ _____

Full Name _____

Home _____

Address _____

Post code _____

Gift Aid

If you are a UK taxpayer, sign the declaration below and the government will top up your donations, providing 28p for every £1 you give at no extra cost to you!

Signature _____

Date _____

Please treat all donation I have made for the six years prior and until further notice as Gift Aid. My annual income and/or capital gains tax is more than Sue Ryder Care will reclaim.

Cheque, Debit and Credit Card Payments

I enclose my cheque
(Please make payable to Sue Ryder Care)

or

Please charge my:

Mastercard Visa CAF card Switch

Card number:

Expiry Date: MM / YY

Start Date: MM / YY

Issue number (Switch only)

Security number

(This is the final 3 digits of the number on the back of the card)

Cardholder's signature

Date

When completed, please return this form to: Donor Care Team, Sue Ryder Care, FREEPOST LON20634, London WC1B 5BR