

Please Fill in the whole form including official use box using a ball point pen and send it to:

Fundraising Department
St. John's Hospice
60 Grove End Road
London
NW8 9NH

Name(s) of account Holder(s)

Bank or Building Society account number

Branch Sort Code

Name and full postal address of your Bank or Building Society

To: The Manager Bank/Building Society

Address

Postcode

Reference Number

Instruction to your bank or Building Society to pay by Direct Debit

Originators Identification Number

FOR ST. JOHN'S HOSPICE USE ONLY

This is not part of the instruction to your bank or Building Society.

Name: _____

Address: _____

Postcode: _____

Tel Number: _____

Email address: _____

£10 £15 £20 a month or my own amount of

I wish my donation to be made on 3rd 10th 20th 25th

I would like my donation to start in (month)
Please allow at least one working month before your first donation

Please make your gift worth even more with Gift Aid

Please treat the enclosed donation and all donations I make to St. John's Hospice from this date as Gift Aid Donations. I am a UK tax payer and have paid an amount of income tax /capital gains tax at least equal to the tax reclaimed on my donation in the relevant tax year. I will notify you if my circumstances change Date:

Instructions to your Bank or Building Society

Please pay St. John's Hospice from the account details in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with St. John's Hospice and, if so, will be passed electronically to my Bank/Building Society.

Signature (s) _____

Date _____

Some Banks and Building Societies may not accept Direct Debits Instructions from some types of accounts

This guarantee should be detached and retained by the Payer

The Direct Debit Guarantee

- This guarantee is offered by all Banks and Building Societies that take part in the Direct Debit scheme. The efficiency and security of the scheme is monitored and protected by your own Bank or Building Society.
- If the amount to be paid or the amount date changes St John's Hospice will notify you 10 working days in advance of your account being debited or otherwise agreed.
- If an error is made by St. John's Hospice or your Bank or Building Society, you are guaranteed a full and immediate refund from your branch of the amount paid.
- You can cancel a Direct Debit at any time by writing to your Bank or Building Society. Please also send a copy to us.