ST CLARE HOSPICE

STARLIGHT WALK

I am taking part in a 5 mile Starlight Walk in September 2011 and raising money for St Clare Hospice (charity number 1063631) who provides care for people with terminal and life-limiting illnesses. It costs in excess of £2.6 million per year for St Clare Hospice to provide care to patients and their families throughout West Essex and East Hertfordshire, so please give generously.

For office use only

RE number:_____

Total received:_____

Gift Aid:_____

Name:_____ Date of Birth: ___/___/____

Address:_____

Contact number:_____ Email:_____

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*Gift Aid allows St Clare Hospice to claim an extra 25p per £1 from the Inland Revenue. To qualify for Gift Aid, you must pay an amount of Income Tax and/or Capital Gains Tax at least equal to the tax that we will reclaim on your donation in the appropriate tax year. Please tick the Gift Aid box and **state your full address and postcode**.

Name To claim Gift Aid, we MUST at least have your first initial and surname		**Gift Aid*** Y/N	**Full HOME address** If you are a tax payer, we can claim 25p per £1 back from the Government in Gift Aid. We MUST have your HOME address to be able to do so. We will not use this data for mailings unless granted permission in the fifth column.		**Donation amount**	Would you like to receive news on St Clare Hospice and its events? **Y/N**	**Donation received?**
First name	**Surname**		**House number/name**	**Home postcode**			

Please make cheques payable to **St Clare Hospice**. Once you have collected your sponsors, please send your donation and this form to St Clare Hospice, Hastingwood Road, Hastingwood, Essex, CM17 9JX

www.stclarehospice.org.uk (01279) 773 750

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