

Breakspear Hospital Trust

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www.breakspearhospitaltrust.org.uk

If you would like to support Breakspear Hospital Trust, please complete the following form and send together with your donation to the address above:

Name	
Address	
Town	
County	
Post Code	Country
Tel	Email

I would like to make a donation of £ _____

Gift Aid Declaration

- I am a UK taxpayer and would like Breakspear Hospital Trust to accept this as a Gift Aid donation.
- I am not a UK tax payer therefore tax cannot be reclaimed on my donation.

Method of Payment

- Cash Debit card MasterCard
- Cheque- *please make payable to: Breakspear Hospital Trust* Visa

Card Details:

Complete this section only if you wish to pay the amount specified above by credit or debit card.

Card number

Exp. date

Issue no. (debit card only)

Signature