

## Life 2023

CODE

## **Light Up A Life Dedication Form**

Please return your form and donation to: St John's Hospice, Slyne Road, Lancaster, LA2 6ST

Your Details:				
Title:	First Name:		Surname:	
Address Line 1:				
Address Line 2:			-	
Town / City:			Postcode:	
Email Address:				
Phone:			Mobile:	
l would like to ।	receive a card in dedication	on of:		
	First Name:		Surname:	Donation Amount
1				£
2				£
3				£
4				£
5				£
-	ns: bit / Credit Card (Sorry we can't take s in credit / debit card):	American Express)	Total am	ount: £
Card Number:			Expiry Date:	Security Code:
·	eque - I enclose a cheque for £	(Please make c	heques payable to 'St John's Ho	(This is the last 3 digits shown on the signature stri
giftaid it	derstand that it i pay less incom	nd any donations I make in the future, or le e Tax and/or Capital Gains tax than the a	mount of Gift Aid claimed on all my donation	nk you.  Hospice, Lancaster. I am a UK taxpayer and unns in that tax year, it is my responsibility to pay any leeded to identify you as a current UK taxpayer.
Keep In Touch:				
	s us to provide vital care to our person and appeals. Would you like to		ook forward to keeping in touch	with you by post and phone to share
	opy to hear from you by email vide your email address above)	No, I would lik	e to opt-out of St John's Hospice	emails
	received our communications in like to change how we contact y			ss here. If you would rather not hear
For internal us	se, date and initial:			WEBSITE FORM
DF Number:		Donation Received:		Contact Preferences Processed:
Donation Proce	essed:	Gift Aid Dec. Processed:		