



Aberford Road, Wakefield
West Yorkshire WF1 4TS
Tel: 01924 213900
Fax: 01924 362769
www.wakefieldhospice.org

BECOMING A FRIEND OF WAKEFIELD HOSPICE

If you would like to support the work of the hospice by becoming a **Friend** please complete the form and send it to:

Mrs. Sue Watson, Hon. Membership Secretary,

Wakefield Hospice, Aberford Road, WAKEFIELD, WF1 4TS

Please tick as applicable

- I wish to become a 'Friend of the Hospice'
- I wish to become a 'Friend for Life'
- Please find enclosed my subscription (and donation) £.....
(Cheques made payable to - **'Wakefield & District Hospice Appeal Fund'**)
- I want the Hospice to treat the enclosed sum of £..... as a Gift Aid donation.
- I want the Hospice to treat this and all donations I make from the date of this declaration until I notify you otherwise as Gift Aid Donations.

Name: (Block Letters).....

Address:

Post Code Telephone

Signed: Date/...../.....

One of the simplest means of paying is by Standing Order

Please tick as applicable

- I would like to receive information on becoming a hospice volunteer
- I would like to receive information about remembering Wakefield Hospice in my will.

Registered Charity Number 513861



BANKER'S STANDING ORDER

If you would like to set up a Standing Order, please complete the form below and return it, together with your FRIENDS application form, to Sue Watson at the address on Page 2.

Please pay to:-

Royal Bank of Scotland, (16 33 27), 35 Northgate, Wakefield.

For Wakefield and District Hospice Appeal,

Account Number – 12893667

£

(sum in words))

on the..... day of..... 200.... and continue to make such payments on the same date monthly*/quarterly*/annually* (***delete as applicable**)

Please continue to make such payments until you receive further notice from me in writing.

Signed:

Date:

To: The Manager of Bank

Address:

..... Postcode

From: Name

Address:

..... Postcode.....

Bank Account No:.....