☐ I would like to dedicate a lantern for a loved one

I enclose a donation of: ☐ £10 ☐ £20 ☐ £30 ☐ Other: _____

(Please fill in a dedicated tag and attach a photo overleaf)

Please provide payment details overleaf

☐ I would like to make a general donation

I enclose a donation of:

☐ £10 ☐ £20 ☐ £30

☐ Other: _____

Registered with FUNDRAISING REGULATOR

☐ I would like a dedication in the Book of Remembrance

☐ I enclose a donation of: ☐ £10 ☐ £20 ☐ £30 ☐ Other: _____

*In capitals, please write the name(s) of the person(s) being remembered (**surname first**) and choose your dedication*

Dedication: **A** *In loving memory* **B** *Sadly missed* **C** *Always in our hearts*

To: _____ Dedication A/B/C From: _____

To: _____ Dedication A/B/C From: _____

Name:

Payment Details TOTAL DONATION AMOUNT:

☐ Card ☐ Cheque (payable to Weston Hospicecare Ltd)

Card No:

Security code: Expiry Date: /

Signature: Date:

☐ I would like to attend a service at St Paul's on Mon 7 December

(Please note, tickets are allocated on a first come first served basis)

Number of people attending: ☐ 1 person ☐ 2 people

☐ I will not attend and will watch the virtual service

Please number the below times between 1-3 with your service preferences:

☐ 1.30pm ☐ 4.30pm ☐ 7.30pm

giftaid it Boost your donation by 25% with Gift Aid

☐ I confirm I am a UK taxpayer. I would like Weston Hospicecare to reclaim the tax on any qualifying donations made in the past four years and on all future donations until further notice. If I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on my donations in that tax year, I must pay any difference to HMRC.

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***To attend a service, fields marked with an asterisk (*) must be completed.**

***Phone Number for Track & Trace:**

***Email Address for ticket confirmation:**

Your Lantern of Life dedication

To:

Write your message here...

From:

OUR REF

ATTACH YOUR PHOTO HERE