

WE ARE MACMILLAN. CANCER SUPPORT

Please use this form to make
a personal donation to
Macmillan.

I would like to give a gift of £ _____	
Title (Mr/Mrs/Miss/Ms/Other)* _____	Name* _____
Home address* _____	
Postcode* _____	Telephone number _____
Email address _____	
* Fields marked with an asterisk must be completed	
Please let us know if your circumstances or address details change so that we can amend our records.	

To help us save money, please tick this box if you do not require an acknowledgement that we have received your gift.

Make your gift worth even more, without costing you a penny.

Do you pay tax? If so, by simply completing this form the tax office will give us 25p for every £1 you donate.

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I am a UK tax payer and I would like Macmillan Cancer Support to treat all donations I make or have made for the past four years as Gift Aid donations until I notify you otherwise.

I understand that I must have paid or will pay an amount of Income Tax and/or Capital Gains Tax in each tax year, that is at least equal to the tax that Charities & Community Amateur Sports Clubs (CASCs) I donate to will reclaim on my gifts. I understand that other taxes such as VAT and Council Tax do not qualify and that Macmillan Cancer Support will reclaim 25p of tax on every £1 that I give.

Full name _____

Date _____

Macmillan Cancer Support and our trading companies would like to hold your details in order to contact you about our fundraising, campaigning and services for people affected by cancer. If you would prefer us not to use your details in this way please tick the box.

We do not sell or swap your details with any third parties, but in order to carry out our work we may need to pass your details to service companies authorised to act on our behalf.

Please return this form with your gift to:

Freepost RSBC-ACSJ-AXRU, Macmillan Cancer Support, Melksham, SN12 6YY

(If you want to use a stamp please omit the Freepost line in the address)

Thank you for helping people living with cancer by supporting our work.

Please make your* <input type="checkbox"/> cheque <input type="checkbox"/> postal order <input type="checkbox"/> charity voucher payable to Macmillan Cancer Support	Security number
OR you can debit your <input type="checkbox"/> CAF charity card <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Switch/Maestro	Card expiry date _____
Card number 	Valid from date _____
	Issue number (Switch/Maestro only) _____