

Mothering Sunday- Gifts order form

Please select your gifts and fill in payment details overleaf and complete the details below.

Yes, I want to give a Gift that Grows

Title, First Name and Surname (Block Capitals):

Address: _____

Town: _____ County: _____

Postcode: _____ Tel: _____

By giving your telephone number you agree to being contacted by Mothers' Union in this way. We will never pass your details to a third party.

If you would prefer not to receive fundraising updates from Mothers' Union please tick this box.

If your gift is in memory, we can also write your loved one's name in our remembrance book displayed in the Mothers' Union chapel.

Yes please. My loved one's name is: _____

I am a Mothers' Union member YES/NO (delete as appropriate)

To help Mothers' Union keep costs to a minimum I do not require an acknowledgement for this donation.

Reg Charity no 240531

giftaid it

Tick this box to make every £1 of your gift worth 25p more for FREE.

Yes, I want to Gift Aid any donations made to Mothers' Union now, in the future and in the past four years until I notify you otherwise.

I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax in the current tax year than the amount of Gift Aid claimed on all my donations it is my responsibility to pay any difference.

Signature: _____ Date: ___/___/___

Title: _____ Initial: _____ Surname: _____



Yes, I want to give a Gift that Grows



Gift	Cost	How many gifts?	How many cards?	How many are in memory?	Total cost
Gift of confidence	£7.50				
Savings and business skills	£17				
A childhood	£31				
A lasting legacy	£41				
A Gift of peace	£82				
Train a parenting coordinator	£101				
Add an extra £1 per gift to receive a seeded greetings card. How many seeded cards in total?					

I enclose a cheque made payable to Mothers' Union

Or please debit my (please tick): Visa/Visa Debit MasterCard

Card Number

CVC number (3 digits on the reverse of your card).

We do not retain your security code once your donation has been processed.

Expiry Date: /

Signature: _____ Date: _____

If sending a cheque please seal this form securely or place inside an envelope and use the freepost address:
 Freepost Plus RTKS-ZCXS-HSBT
 Mothers' Union
 126 Fairlie Road
 SLOUGH, SL1 4PY

Thank you for your order

