

I wish to apply to become a Friend of Alabaré.

Name.....

Address.....

.....

.....

Post Code.....

Tel.....

E mail.....

Are you currently supporting any of their work?

.....

.....
The Care Centres Constitution requires voting members be Christians If you are eligible do you wish to be considered for nomination Yes / No

Signed.....

Please return this form to Friends of Alabaré
Alabaré House
15 Tollgate Road
Salisbury SP1 2JA
Tel./ Fax. 01722 501586

E Mail friendsofalabare@alabare.org

**CHARITABLE GIVING
DECLARATION**

IMPORTANT please complete in BLOCK CAPITALS

If you complete and return this declaration to us, any donation you make from 6 April 2000, whether large or small, regular or one off, Friends of Alabaré will be able to claim the tax back if you are a UK taxpayer. We may ask you to confirm your tax status from time to time.

Title.....Forename's.....

Surname.....

Address.....

.....

.....

.....Post Code.....

This declaration confirms my wish to make donations to Friends of Alabaré under the Gift Aid scheme and applies to all donations made by me from 6th April 2000 until further notice. I understand that I must pay an amount of Income tax or Capital Gains Tax in the relevant tax year equal to any tax reclaimed by Friends of Alabaré in that period.

Signature.....

Date.....

Ref.No.....
Friends of Alabaré is an unregistered charity

BANKERS ORDER

To: The Manager

.....Bank plc

.....

.....

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Please pay to Lloyds TSB Bank plc
38 Blue Boar Row
Salisbury
SP1 1DB
Sort Code 30 97 41

For the credit of Friends of Alabaré A/C Number 04061902 the sum of Ten pounds (Sum in words) £10 immediately and on 1st December thereafter until further notice.

This cancels any previous Standing Order to Friends of Alabaré under this same reference.

Signed:

A/C Number:

Date:

Please quote Ref: