



AWCH Membership Form

REGISTERED CHARITY NO. 222294
www.awchwales.org.uk
Telephone: (01792) 205227
Email: awchwales.org@tiscali.co.uk

I would like to: (please tick)

Become a member

Type of membership (please tick):

- Individual membership**
- £7.50
- Family/Group membership**
- £10.00

Make a donation

I would like to make a donation
of £..... to help AWCH
achieve it's aims and improve the
welfare of children in hospital.

I enclose a cheque for £..... made payable to **AWCH**.

After completing the **Gift Aid** declaration below, please sign and return this form along with your cheque to:

Mrs Ennis Roberts, 20 Caebryn Avenue, Sketty, Swansea, SA2 9AT.

Gift Aid Declaration:

Using Gift Aid means that for every pound you give, AWCH will receive an extra 28p from the Inland Revenue, helping your donation go further.

This means that £10 can be turned into £12.80 just so long as membership fees and/or donations are made through Gift Aid. Imagine what a difference that could make, and it doesn't cost you a thing.

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I would like to **become a member / make a donation** (delete as appropriate) to **AWCH** using Gift Aid. My details are as follows:

Name: _____

Address: _____

_____ **Postcode:** _____

Telephone: _____

Email: _____

I would like to Gift Aid the enclosed membership fee / donation of £.....

I would like to Gift Aid all donations I've made to **AWCH** since 6 April 2000 and all donations in the future until I notify you otherwise.

To qualify for Gift Aid, what you pay in income tax or capital gains tax must at least equal the amount the charity will claim in the tax year.

Signature..... Date.....