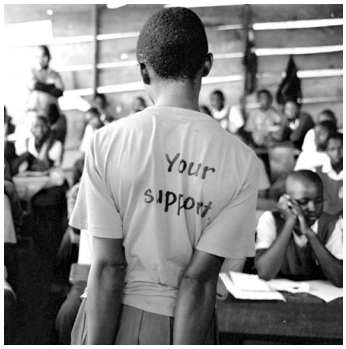
HEALTHLINK
WORLDWIDE
www.healthlink.org.uk



Postal donation form

Donations are vital to our work in communicating inclusively and effectively about health and disability issues

Your details

Title Mr/ Mrs/ Miss/ Ms First name Surname

Address

Postcode Email address

Telephone (day) Telephone (evening)

☐ I enclose a cheque made payable to 'Healthlink Worldwide' for £

☐ I authorise you to debit my credit/debit card to the amount of £

Card details (please note that Amex payments are not accepted)

Start date / / Expiry date / / Switch/Issue number ☐

Data Protection: We will send you an acknowledgement of your donation.
We may send you updates on our work or invitations to events, and so on. If you would prefer **not** to receive any information from us, please tick this box ☐
We will not share your details with any other organisation.

giftaid it Your support could be worth even more if you are a UK tax payer. Please complete the declaration below so that we can reclaim tax on your donations to Healthlink Worldwide.

Gift Aid Declaration: I confirm that I am a UK tax payer and pay an amount of Income Tax and/or Capital Gains Tax at least equal to the tax to be reclaimed in the tax year. I would like all donations I make from the date below to be treated as Gift Aid donations until I notify you otherwise.

Signature Date / /

Once completed, please return this form to:
CAF/Healthlink Worldwide, Kings Hill, West Malling, Kent ME19 4TA, UK

Thank you!

Healthlink Worldwide is registered charity no. 274260

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