Crohn's and Colitis UK Gift Card order form

Please send this form together with your cheque or debit/credit card details to:
Fundraising, Crohn's and Colitis UK, 4 Beaumont House, Sutton Road, St Albans, Herts, AL1 5HH

Mr/Mrs/Miss/Other ……..

Surname …….. Membership No (if appropriate) ……

Forename ……

Address ……..

Postcode …….

Daytime telephone number …….. Mobile ……

Email ……

Which card would you like?

□ Snowmen □ Robin Trio □ Generic

What gift would you like to give? Choose from the following options*:

□ **£10** could pay for the families of four newly-diagnosed children to receive our Family Information Pack.
□ **£15** could pay for 30 patients or their carers to receive our booklet Understanding Crohn's and Colitis.
□ **£20** could pay for a person in distress to receive support from our helplines.
□ **£50** could be a valuable contribution to a Family Fun and Information Day
□ **£100** could help to pay for equipment for a research project.
□ General donation of **£** *Please insert amount*

** these are only examples only of how donations could benefit our work. All donations will be paid into our General Fund to be used where they are most needed.*

What message would you like us to include? We will not mention the amount of the donation unless you include it in the message.

Who is the Gift Card for?

Name:
Address *(not needed if you want us to send the Gift card to you)*

□ I enclose cheque for £
□ Please charge my debit/credit card £

□ Visa □ Mastercard □ Maestro/Switch □ Delta □ Solo □ Electron

Card Number

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Start date					Expiry Date					Issue No.			Security Code*		
		/					/								

* the last three digits on the back of your card