



## Donation Form

(Full name and Address)


### Set up a Standing Order

Choosing to set up a standing order allows us to plan for the future, knowing that we have sufficient funds in place.

If you would like to make a regular donation please complete the form below and send it back to us, using the return FREEPOST envelope. We will then forward it on to your bank.

<b>Name of Beneficiary:</b>	<b>Beneficiary's Bank:</b>	<b>Account Number:</b>	<b>Sort Code:</b>	<b>Branch:</b>
Children with Cystic Fibrosis Dream Holidays	HSBC Bank	01554336	40-20-24	Epsom Surrey

Name of Bank .....

Your bank's Address.....

Your Account number.....Sort Code.....

Amount Gifted £.....In Words.....

Date of first Payment   /   / 20   And there after every.....  
*Frequency: Weekly/Monthly/Annually*

Until Further notice in writing or until   /   / 20   Please debit my account accordingly.

Account Holders Name .....Date.....Signature.....

*giftaid it*

**I wish my donation to be Gift Aided**

In order to claim Gift Aid we need your first Initial, Title and surname. If these are not correct on your address overleaf then please enter the correct information below.

**Title**.....**Initial**.....**Surname**.....

I am a UK taxpayer. I would like CF Dream Holidays to treat all donations made by me on or after January 2022 as Gift Aid donations until I notify Dream Holidays otherwise.

**I do not qualify for Gift Aid**

**HEAD OFFICE**  
CF Dream Holidays  
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[WWW.CFDREAMHOLIDAYS.CO.UK](http://WWW.CFDREAMHOLIDAYS.CO.UK)  
 **CYSTIC FIBROSIS DREAM HOLIDAYS CHILDRENS CHARITY**

**Registered Charity No. 1036069**  
**Scottish Charity No. SC043332**

We are a totally independent charity and have no links with any other Cystic Fibrosis organisation