GIVE IN **MEMORY**

IN MEMORY DONATION FORM

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Please fill in your details so we can thank you for your donation.

Ms ☐ Mrs ☐ Mr ☐ Other

Full name _____

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I am under 18 ☐ Date of Birth (required if under 18) D D M M Y Y

We will use this to claim Gift Aid on your donations and to thank you. The information provided will be held by Amnesty International UK Section Charitable Trust, and by Amnesty International United Kingdom Section*. For more information about how we use your personal information, see www.amnesty.org.uk/privacy-policy

MY DONATION

A gift in memory of

My relationship to the deceased

Please include next of kin's name and address if you would like us to write to them to tell them about your donation.

Next of kin's name and address

I would like to make a donation of £30 ☐ £50 ☐ £100 ☐ or my preferred amount of £

giftaid it If you are a UK taxpayer please tick the box below so we can claim at least 25p for every £1 you give at no extra cost to you.

☐ I am a UK Taxpayer and would like Amnesty International UK Section Charitable Trust to treat all donations that I have made in the past four years and all donations that I make from the date of this declaration as Gift Aid donations

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☐ **I enclose a cheque for a total of £_____ payable to Amnesty International UK Section Charitable Trust**

☐ **I would like you to debit the following card with £_____**

Please enter your Visa/Mastercard/Maestro number below and sign.
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☐ MasterCard ☐ Visa ☐ Maestro (Switch) Valid From: ☐☐/☐☐ Expiry Date: ☐☐/☐☐
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Card No ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐ Issue No. ☐

Signature _____ Date ☐☐/☐☐/☐☐

THANK YOU FOR YOUR SUPPORT

Please make cheque/PO orders payable to 'Amnesty International UK Section Charitable Trust' and send to: FREEPOST RLUB-JKSB-HLCH, Supporter Communications Team, Amnesty International UK, 17-25 New Inn Yard, London EC2A 3EA
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