ST LUKE'S
HEALTHCARE
FOR THE CLERGY

Room 201, Church House
27 Great Smith Street
London
SW1P 3AZ

Standing Order Form

Please pay **St Luke's Healthcare for the Clergy** the regular sum of:

£ _____ Starting on: (D) (M) (Y)

and monthly ☐ quarterly ☐ annually ☐ Thereafter until further notice.

(tick as appropriate)

Yorkshire Bank, 46-48 Oxford Street, High Wycombe HP112XQ (**Sort Code 05-04-70**)
For the credit of St Luke's Healthcare for the Clergy (**account no. 61408276**)

Quoting Ref:_____.

Bank Name	
Sort Code	
Address	
Post Code	

Account No.	
Account Name	

Signature Date	

This cancels my existing standing orders to St Luke's Healthcare to the Clergy and/or St Luke's Hospital for the Clergy.

A charitable company limited by guarantee, registered in England & Wales.
Company no. 06511046, charity no. 1123195

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Gift Aid Declaration

I wish St Luke's Healthcare for the Clergy to treat all gifts that I have made in the past 6 years and all future gifts that I make from the date of this declaration as Gift Aid donations.

Title	
Full Name	
Address	
Post Code	

Signature	
Date	

Notes – Please notify St Luke's Healthcare for the Clergy if you:
1. Want to cancel this declaration
2. Change your name or home address
3. No longer pay sufficient tax on your income and/or capital gains

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