Name:_____

Address:_____

_____

Postcode:_____

Email_____

Event: _____

Date: _____

HUNTINGTON'S DISEASE ASSOCIATION NORTHERN IRELAND

Families at the heart of all that we do

giftaid it

Please tick the 'Gift Aid' ✓ box and increase your donation by 25% at no extra cost to you*

Every £1.00 becomes £1.25

(please see statement at bottom left of this page)

Please tick the Gift Aid Box and include your home address if you are a UK taxpayer to allow us to claim an extra 25p on every £1 donated at no cost to you.

First Name	Surname	Home Address	Postcode	Gift Aid	Donation	Date Paid	Email Address	Opt Out of Mail

TOTAL £

Thank you for your donation.

We would like to keep you informed about our work but if you do not want to be contacted by HDANI in future please tick the 'Opt Out of Mail Box'

HUNTINGTON'S DISEASE ASSOCIATION NORTHERN IRELAND

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Sponsorship Form Continuation

HUNTINGTON'S DISEASE ASSOCIATION NORTHERN IRELAND

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Name: **Event:**

Please tick the Gift Aid Box and include your home address if you are a UK taxpayer to allow us to claim an extra 25p on every £1 donated at no cost to you.

First Name	Surname	Home Address	Postcode	Gift Aid	Donation	Date Paid	Email Address	Opt Out of Mail

TOTAL £

Thank you for your support. Please contact info@hdani.org.uk to let us know about your event.

Our bank details are: Danske Bank Sort Code: 95 06 79 Account Number: 300 479 02