

Please use this form if you wish to continue to sponsor your leaf for more than one year

I Title/Full name:

Address:

Post Code:

Would like to pay to NatWest Bank PLC, St Peter Port, Guernsey, GY1 4BQ for the credit of **Les Bourgs Hospice** (Sort Code **60-09-20** Account number: **74129856** the sum of **£100.00** annually commencing on:

This payment is to be made **annually** on the same date until further notice

or until:

Signed:

Today's date:

Name and address of your Bank:

Sort Code:

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Account Number:

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Payment Reference (Hospice use only)

(Note to bank: Please ensure this appears on all payments)

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Please ensure all alterations are initialled.

When completed please return this form with your application to:

Fundraising Administrator, Les Bourgs Hospice, Andrew Mitchell House, Rue du Terre,
St Andrews, Guernsey, GY3 5HD. Telephone: 01481 210329
Email: trish@lesbourgs.com. Website: www.lesbourgshospice.org.gg