

**I wish to apply to become a Friend of Alabaré.**

Name.....

Address.....

.....

.....

Post Code.....

Tel.....

E mail.....

Are you currently supporting any of their work?

.....

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.....  
The Care Centres Constitution requires voting members be Christians If you are eligible do you wish to be considered for nomination Yes / No

Signed.....

.....  
Please return this form to Friends of Alabaré  
Alabaré House  
15 Tollgate Road  
Salisbury SP1 2JA  
Tel./ Fax. 01722 501586

E Mail friendsofalabare@fsmail.net

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**CHARITABLE GIVING  
DECLARATION**

**IMPORTANT please complete in BLOCK CAPITALS**

If you complete and return this declaration to us, any donation you make from 6 April 2000, whether large or small, regular or one off, Friends of Alabaré will be able to claim the tax back if you are a UK taxpayer. We may ask you to confirm your tax status from time to time.

Title.....Forename's.....

Surname.....

Address.....

.....

.....

.....Post Code.....

This declaration confirms my wish to make donations to Friends of Alabaré under the Gift Aid scheme and applies to all donations made by me from 6<sup>th</sup> April 2000 until further notice. I understand that I must pay an amount of Income tax or Capital Gains Tax in the relevant tax year equal to any tax reclaimed by Friends of Alabaré in that period.

Signature.....

Date.....

Ref.No.....

**Friends of Alabaré is an unregistered charity**