

Donation form for Dementia Awareness Week™ 2012

Amount raised/Please find a cheque for: _____

or please debit my Visa / MasterCard / Maestro / CAF Card
with the amount specified.

Title _____ First Name _____

Last Name _____

Address _____

_____ Postcode _____

Telephone _____

Email _____

By providing your email address, you are agreeing to us contacting you
in this way.

Card number

Security code Issue number (Maestro)

Start date Expiry date

Signature _____ Date _____

Alzheimer's Society would like to contact you about fundraising,
campaigning and services for people affected by dementia. We will not
pass your details to third parties.

I would prefer not to receive information about fundraising,
campaigning and services for people affected by dementia. ☐

Please return to: Alzheimer's Society, Devon House,
58 St Katharine's Way, London E1W 1LB