



THE

HUMAN GIVENS FOUNDATION

Offer of Support to the Human Givens Foundation
Registered Charity No 1108432

To become a member to support the work of the Human Givens Foundation, please complete this form, print it out and send it to us, along with your letterhead, to:
The Human Givens Foundation, Chalvington, East Sussex BN27 3TD, UK.

Payment Details for your CORPORATE MEMBERSHIP

- I enclose a cheque made payable to the Human Givens Foundation for £ _____ (minimum £1,000)
- I enclose a CAF/other Charity voucher for £ _____ (minimum £1,000)
- I wish to pay £ _____ (minimum £1,000) by standing order *(If you would like to pay by this method, please complete the standing order form on the following page)*
- I wish to pay by credit card (Switch/Visa/MasterCard), and I have completed the authorisation below to debit £ _____ (minimum £1,000) from my account.

Personal Details (* Required Items)

Title*: Mr / Mrs / Ms / Miss / Dr / Prof *(delete as appropriate)*

First Name*: _____ Surname*: _____

Company Name: _____ Industry: _____

Address*: _____

_____ Town/City*: _____

County: _____ Post Code*: _____

Daytime Tel*: _____ Email*: _____

Gift Aid: I want the Human Givens Foundation to reclaim tax on this membership subscription. (I am a UK taxpayer and I have paid an amount of UK income or capital gains tax equal to any tax the HGF could reclaim.)

Credit Card Details

Card Type: VISA / MasterCard / Switch *(delete as appropriate)*

Card Number: _____

Card Holder Name: _____

Expiry Date: mm/yy _____ Start Date: mm/yy _____

Issue Number: (Switch only) _____ Security Number *(Last three digits on the reverse of the card):* _____

Signature: _____ Date: _____



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Standing order for CORPORATE MEMBERSHIP

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Please instruct my bank to pay the following amount by standing order:

To: _____ Bank plc Sort Code: --

Bank Address: _____

_____ Post Code: _____

I instruct you to pay:

£ _____ by annual standing order on _____ (date) each year or

£ _____ by monthly standing order on _____ (date) each month

Account No: _____

In the name of: _____

I instruct you to pay the above amount(s) from my account, on the dates shown, with immediate effect,
to the account of the Human Givens Foundation, account no. 01430610, sort code 40-25-03,
at HSBC Bank plc, 125 Church Road, Hove, East Sussex BN3 2AN.

I will inform you (my bank) in writing if I wish to cancel this instruction.

Signature: _____

Date: _____