

# Your donation is ensuring that no man is left behind. Thank you.



Title: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

## Staying in touch

We would love to keep you updated with our work and research updates, appeals, events and fundraising, and patient resources. To opt out or change how we contact you, go to [pcr.org.uk/update-your-contact-preferences](https://pcr.org.uk/update-your-contact-preferences). Email us at [info@pcr.org.uk](mailto:info@pcr.org.uk) or phone **0203 735 5444**. Visit our website to read our Privacy Policy.

Keep me updated by email: **Yes**  **No**

Keep me updated by post: **Yes**  **No**

You can contact me via phone: **Yes**  **No**

## I wish to donate:

£ \_\_\_\_\_

Payment method: Cash / Cheque / CAF Voucher / Card (please circle as appropriate)

Make cheques payable to **Prostate Cancer Research**

**Your card details:** Mastercard / Visa / Visa Debit / CAF card (please circle as appropriate)

Card number:  Expiry date:

We will debit your donation via our payment platform, Fundraise Up.

Cardholder's name: \_\_\_\_\_

## Gift Aid Declaration

I am a UK taxpayer and would like Prostate Cancer Research to treat this donation and any donations I make in the future and have made in the past 4 years as Gift Aid donations, until I notify you otherwise. I understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year, it is my responsibility to pay any difference.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I am **NOT** eligible for Gift Aid.

Please return your donation form to Prostate Cancer Research, Suite 2 23-24 Great James Street London WC1N 3ES. Thank you.