



SANTA SAUNTER ENTRY FORM

ONE FORM PER GROUP OF FOUR

Registered Charity No.: 1071613

Title First Name

Last Name

Address

Post Code

Tel

E-mail

We are participating in honour of

How did you hear about this event?

The name of your team of Santas

Please list the names of the other people in your team of Santas

Entry for 4 Santas is £10.00, please enclose payment with completed form

Payment Details

I enclose a cheque for £ made payable to 'Douglas Macmillan Hospice'

I wish to pay £ by Credit or Debit Card

Card Type: Mastercard Visa Switch/Maestro Issue No.

Card Number

Start Date Expiry Date Last 3 digits on signature strip

Name on Card Signature

Card holders address if different from above

Post Code

Please return this form together with your entry fee to:

Santa Saunter, Douglas Macmillan Hospice, Fundraising Department, Barlaston Road, Blurton, Staffs ST3 3NZ
Tel: 01782 344304 Fax: 01782 344350 fundraising@dmhospice.org.uk

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Date Received	Amount	MOP	Donor Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>