THE LIVE LIFE TO THE FULL FUND

I understand that this gift will be used by The Saint John Southworth Foundation for the benefit of St Joseph's Catholic Primary School, Maida Vale.

| | | i would like to | o make a voluntar | y girt: | |
|-----------------------|----------------|------------------|----------------------------|-----------------|-------------------|
| I pledge a r | monthly/an | nual amount o | of £over | r | years for a total |
| gift o | f £ | OR I would | like to make a one | off gift of £ | · |
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| giftaid li | ncrease the v | value of your do | nation at no addition | | ı: |
| J . | | - | gift aid this donation, ar | • | |
| any dona | ations made in | the past 4 years | to The Saint John Sou | ıthworth Founda | ation. |
| PAYMENT C | PTIONS: S | tanding orde | rs or direct trans | fers can be | made using the |
| school's ban | | | | | |
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| | | t Josephs (MV | ') Association | | |
| Sort Code: 3 | | 24200 | | | |
| Account Nu Bank Name: | | | | | |
| | • | | le 'SJMV' and ye | our initial a | and surname as |
| reference | | | , | | |
| Please tell u | is the date | of your first o | online payment: | | |
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development@sjscat.co.uk.

Completed forms should be returned to the Development Office by emailing