



DONATION

Your name:

Date :

Gift Aid?

Individual Membership (Annual Fee : By donation)

Please tick box if you would also like to be listed as a member and remain on our list as a supporter.
We are a membership organisation.

Your address

Address :

City :

Postal Code :

Email:

Phone

+00

Donations

Bank Details are: Hearing Loss Cornwall
Barclays Bank Sort Code 20-87-94
Account No. 50283703

Your signature

Payments by cheque are payable to:
Hearing Loss Cornwall

We do not send out regular mailings but please feel free to ask for any updates, on request.

Hearing Loss Cornwall
3 Walsingham Place, Truro, TR1 2RP
info@hearinglosscornwall.org
Tel: 01872 225868



<https://www.facebook.com/hearinglosscornwall>

twitter.com/HLcornwall



Please print and scan this form and email back or post to our address. Many thanks