

6 Marshalsea Road
London
SE1 1HL
T 020 7234 9660
F 020 7234 9661

www.cmf.org.uk

CMF

Christian Medical Fellowship

Autumn Appeal - Response Form

(For members who wish to pay by cheque,
charity voucher or direct debit)

From: _____ CMF no: _____

Email / Tel no: _____

Address: _____

I would like to make a gift of:

£50 £100 £250 £500 £1,000 £2,000 Other £ _____

I enclose a cheque made payable to *Christian Medical Fellowship*

I enclose a charity voucher made payable to *Christian Medical Fellowship*

Please send me details about giving monthly by Direct Debit

We will claim Gift Aid where we hold a Gift Aid declaration.

Please return the completed response form to the following Freepost address:

FREEPOST RRKS-RZSB-TAEH
Christian Medical Fellowship
6 Marshalsea Road
LONDON SE1 1HL