Would You Like to Help The Well?

Please help support The Well in its work by filling in the form below & returning to The Well, 45 High St, Kibworth, Leicestershire, LE8 0HS.

| Name: | | | | | | |
|---|----------------|--|----------------------|------------------------|--------------------|----|
| Addres | ss: | | | | | |
| Postco | ode: | | | | | |
| Phone | ! | | | | | |
| Email: | | | | | | |
| I'd like to be contacted about volunteering | | | | yes | no | |
| I wish to make a regular monthly donation | | | | yes | no | |
| £5 | £10 | £15 | С | ther | £ | |
| Signed | l: | | Da | te: | | |
| | | | | | | |
| Please t | ng gifts of | RATION t aid donati money ma | ons a | ll day | yes | |
| & in the | future. | | | | | |
| capital gai equal to th | ns tax for eac | pay an amount h tax year (6 A tax that all the | pril to 5 chariti | 5 April) t es or co | hat is at mmuni | ty |