SUPPORTING THE ST CATHARINE'S CAMPAIGN

Full Name	Matr Yr					
Address						
Postcode		Country				
Telephone		E-mail				
I would like my gift to go to	wards					
☐ TEACHING	TEACHING			OTHER, e.g. Sport, Chapel (please specify):		
☐ ENDOWMENT						
☐ STUDENT SUPPORT						
I wish to make a SINGLE GI	IFT of £ and en □ a cheque or (payable to St Catharine	□ a CAF vouch	er			
I wish to make a REGULAR	GIFT (please fill in the Standing	g Order Form below))			
Name of your bank						
Address of your bank						
Account Name						
Account Number		<u></u>				
Please pay the sum of £ been made.	monthly/quarterly/annuall	ly starting on	(date) until	payments have		
Signed			Date _			

For Office Use only: Please make the payment to St Catharine's College Acc No 60120553, Sort Code 20-17-19 at Barclays Bank plc, St Andrews Street, Cambridge CB2 3PZ Reference No:

Please return this form to: Alumni & Development Office, St Catharine's College, Cambridge, CB2 1RL St Catharine's College is a registered charity (no. 1137463)

