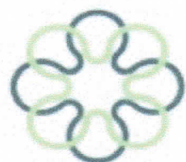


FRIENDS OF



HOLY CROSS

CARE VILLAGE

friends@holycrosscare.co.uk

WOULD YOU LIKE TO JOIN

THE FRIENDS OF



HOLY CROSS

CARE VILLAGE

The Friends of Holy Cross Care Village has been created to support the excellent work being done by all the staff within the Holy Cross retirement community. The aim is to raise money which will directly benefit the residents and staff through projects large and small.

We will be organising events during the year and will keep you informed by email and newsletter. If you feel able to help us with any fundraising that would be brilliant! We would love to hear from you!

Annual individual membership fee: £10

Annual joint membership fee: £15

(All members must be aged 18 years or over)

Residents of Holy Cross Care Village: NO CHARGE

CHEQUES SHOULD BE MADE PAYABLE TO: Friends of Holy Cross Care Village

If you would like to become a Friend of Holy Cross Care Village, please pick up a membership form from Reception or you can email us at: friends@holycrosscare.co.uk or write to: The Secretary, Friends of Holy Cross Care Village, Holy Cross Priory, Lewes Road, Cross-in-Hand, Heathfield. TN21 0DZ to obtain a membership form.

We look forward to hearing from you. Thank you for your support.

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If you would like to become a Friend of Holy Cross Care Village, please complete the slip below and return it with your membership fee (if applicable) to either the 'Friends' box in the Care Home reception, or post it to:

The Secretary, Friends of Holy Cross Care Village, Holy Cross Priory, Lewes Road, Cross-in-Hand, Heathfield. TN21 0DZ

Thank you for your support.

email at: friends@holycrosscare.co.uk

Annual individual membership fee: £10 Annual joint membership fee: £15 PAID BY CASH / CHEQUE
(All members must be aged 18 years or over) Residents of Holy Cross Care Village: NO CHARGE
CHEQUES SHOULD BE MADE PAYABLE TO: Friends of Holy Cross Care Village

Name: _____ Title(s) _____

Address: _____

Telephone number: _____

email address: _____

By providing the above information you are agreeing that the Friends of Holy Cross Care Village can hold this data until such time as you ask for it to be deleted, or in accordance with the General Data Protection Regulation. This data will not be shared with any third party.

ARE YOU HAPPY TO BE APPROACHED TO ASSIST WITH FUNDRAISING EVENTS? YES/NO

Signed _____ Date _____