SPONSORSHIP FORM

1
No.

	*If I have ticked the box headed 'Gift Aid ' I confirm
Name:	that I am a UK Income or Capital Gains taxpayer. I have read this statement and want the charity
	named above to reclaim tax on the donation detailed
	below, given on the date shown. I understand that if I pay less Income Tax/or Capital Gains tax in the
My sponsorship goal:	current tax year than the amount of Gift Aid claimed on all of my donations it is my responsibility to pay
	any difference. I understand the charity will reclaim 25p of tax on every £1 that I have given.

Title	Full name	Home address	Post code	Gift Aid*	Amount	Date paid
Miss	Edna Example	15 Example Avenue	ED1 2NA	√	£10.00	01/03/25

My details

Full Name	Phone
Address	Email
Post Code	Date