



SPONSORSHIP FORM

Name _____ Event: _____ Date of Event: _____

Please read carefully before donating:

We who have given our names, addresses and ticked the box entitled 'Gift Aid' want the charity to reclaim tax on the donations detailed below, given on the date shown.

We understand that each of us must pay Income Tax or Capital Gains Tax equal to the tax reclaimed by the charity on the donation.

Full Name	Address	Postcode	Amount Pledged	Amount Collected	Date Given dd/mm/yy	Gift Aid Please Tick
<i>John Smith</i>	<i>1 High Street, Anytown, Anywhere</i>	<i>AA1 2BB</i>	<i>£5</i>	<i>£5</i>	<i>01/01/2001</i>	