

# Sponsorship Form



<b>Name</b>	<b>Event</b>
<b>Team Name</b>	<b>Event Date</b>
<b>Address</b>	
<b>Postcode</b>	
<b>Email Address</b>	

*giftaid it*

If I have ticked the box headed 'Gift Aid?' I confirm that I am a UK Income or Capital Gains taxpayer.

I have read this statement and want Princess Alice Hospice 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 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.

Full Name <small>(First name and surname)</small>	Home Address <small>(Only needed if you are Gift Aiding your donation) Please do not put your work address here.</small>	Postcode	Donation Amount	Gift Aid?	Date Paid
E.G. John Smith	123, Church Street, Esher, Surrey	PC0 DE1	£20	✓	01/01/16



# Princess Alice Hospice

Name **Event**

If I have ticked the box headed 'Gift Aid?' I confirm that I am a UK Income or Capital Gains taxpayer. I have read this statement and want Princess Alice Hospice 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 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.

*giftaid it*

Full Name (First name and surname)	Home Address (Only needed if you are Gift Aiding your donation) Please do not put your work address here.	Postcode	Donation Amount	Gift Aid?	Date Paid
<b>Total donations received</b>			<b>£</b>		
<b>Total Gift Aid donations</b>			<b>£</b>		
<b>Date donation given to Princess Alice Hospice</b>					

(For office use only)