

Sponsorship Form



Big Wheel 2019 Sponsorship Form

Please complete in block capitals

Please sponsor (your name)

Your Address.....

Email.....

Home Tel:..... Mobile no:

By ticking the box headed 'Gift Aid? ✓', I confirm that I am a UK Income or Capital Gains taxpayer. I have read this statement and want St. Michael's Hospice (North Hampshire) to reclaim tax on my sponsorship donation below, given on the date shown. I understand that should 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 St. Michael's Hospice (North Hampshire) will reclaim 25p of tax on every £1 that I have given.

Please remember: You must provide your full name, home address, postcode & '✓' Gift Aid for St. Michael's Hospice (North Hampshire) to claim tax back on your donation.

Sponsors Full Name (First name & surname)	Sponsor's Home address Only needed if you are Gift Aiding your donation Please do not give your work address as we will not be able to claim Gift Aid	Postcode	Donation Amount (£)	Date paid	Gift Aid ✓
Arthur Example	1, The Street, Town, County	RG24 9NB	£50	22/01/2016	✓
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Sponsors Full Name (First name & surname)	Sponsor's Home address Only needed if you are Gift Aiding your donation Please don't give your work address as we will not be able to claim Gift Aid	Postcode	Donation Amount (£)	Date paid	Gift Aid ✓
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<p><i>Please send money and your sponsorship form to St. Michael's Hospice, Basil de Ferranti House, Aldermaston Road, Basingstoke, RG24 9NB</i></p> <p><i>Please make cheques payable to: St. Michael's Hospice (North Hampshire). For further information please call the Fundraising Hotline on 01256 848848 or email events@stmichaelsospice.org.uk</i></p>	OFFICE USE ONLY	
	Total donations received	£
	Total Gift Aid donations	£
	Date donations were given to St. Michael's Hospice (North Hampshire)	
	Registered Charity: 1002856	Approved by: