

Sponsorship and Gift Aid declaration form

giftaid it



Name of event:

Name:

Address:

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 East Lancashire 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.

Title	Full Name (forename and surname)	Home Address Not your work address (this is essential for Gift Aid)	Postcode	Amount £	Date Paid	Gift Aid? <input type="checkbox"/>
Mr	Alan Example	10 Example Street	EE1 1EA	£10	01/02	✓
Total donations received				£		
(Office use only) Total Gift Aid donation				£		

Remember: Full name + Home address + Postcode + ✓ = *giftaid it*

Title	Full Name (forename and surname)	Home Address Not your work address (this is essential for Gift Aid)	Postcode	Amount £	Date Paid	Gift Aid? <input type="checkbox"/>
Remember: Full name + Home address + Postcode + ✓ = <i>giftaid it</i>			Total donations received			
Cheques should be made payable to: East Lancashire Hospice			Total Gift Aid donation (office use only)			

Thank you for your support.
Please return this form, along with all sponsorship money to East Lancashire Hospice by April 2021.

Post to: Leanne Green, Merton House,
East Lancashire Hospice
Park Lee Road, Blackburn, BB2 3NY
Tel: 01254 287011 www.eastlancshospice.org.uk
Registered Charity No: 1075653