

E

Official Sponsor Form

Name:			
Address	S:		
Event:			

	C	. 1
ai	ftaid	ut

If your sponsors are UK tax payers, please encourage them to tick the Gift Aid box as we will receive an extra 25p per £1 they donate. Please ensure their address and postcode is filled in as it is vital for Gift Aid to be claimed.

		I			
FULL NAME	ADDRESS	POSTCODE		AMOUNT	RECEIVED
First name and surname	Full address		Please tick	£	Please tick

TO1	ΓΑΙ	L:	

Please make cheques payable to Leukaemia Care and return with this form to: Leukaemia Care, One Birch Court, Blackpole East, Worcester, WR3 8SG

GIFT AID DECLARATION

By ticking the Gift Aid box, I confirm that I want to Gift Aid my donation and any donations I make in the future or have made in the past four years. I confirm that I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year, it is my responsibility to pay the difference.