

Weston Hospicecare Sponsorship Form

I'm taking part in...



I'd like to raise £

to care for local people needing our hospice!

Title	First Name	Surname					
Home Address							
Postcode		Phone					
Email							
If you are happy for us to contact you about future events, hospice news and fundraising please tick here: Your details are safe with us. Visit our privacy policy at westonhospicecare.org.uk/privacy for more details							

Gift Aid funds all hospice care in our community for a week every year!

Boost your donation by 25p for every £1 you donate! In order to Gift Aid your donation you must tick the box below.

I want to Gift Aid my donation and any donations I make in the future or have made in the past 4 years to Weston Hospicecare. 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 of my donations in that tax year it is my responsibility to pay any difference.

Sponsors must complete their own details – forms in the same handwriting are not valid for Gift Aid purposes!

Use a blue or black pen and write in CAPITAL letters. All fields are mandatory.

#tickthebox Please, make sure we can read your full name, home address, postcode and tick so Gift Aid can be claimed on your donation. Thank you!

Title	Full Name (first name and surname)	Postcode	Home Address (not your work address – this is essential for Gift Aid)	Amount	Gift Aid	Date
MISS	SAMPLE JONES	AB12 3CD	7 Example Street, Town, County	£ 20.00		01/01/2021
				£		
				£		
				£		

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				£		
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				£		
			I have raised a total of	£		

To claim Gift Aid on the money you raise and boost your total by 25% make sure you send this form back to:

Weston Hospicecare, Jackson-Barstow House, 28 Thornbury Road, Uphill, Weston-super-Mare, BS23 4YQ



You are helping a local person in great need of expert hospice care. Please give generously.