

Sponsorship Form Template

Sponsorship form for:

Pupil name:	Year:
School name:	Name of Charity:
	Date:

Charitable Event & Date

giftaid it

Please read carefully before donating: We who have given our names, addresses and ticked the box entitled "Gift aid" want the charity to reclaim tax on the donations detailed below, given on the date shown. We understand that each of us must pay income tax or Capital Gains Tax equal to the tax reclaimed by the charity on the donation.

Full name:		Signature*:	
Address:			
		Postcode:	
Amount Pledged:	Amount collected:	Date Given:	Gift Aid (please tick)

* Please make sure that the details above have been filled before signing this form to confirm its validity.

Full name:		Signature*:	
Address:			
		Postcode:	
Amount Pledged:	Amount collected:	Date Given:	Gift Aid (please tick)

* Please make sure that the details above have been filled before signing this form to confirm its validity.

Full name:		Signature*:	
Address:			
		Postcode:	
Amount Pledged:	Amount collected:	Date Given:	Gift Aid (please tick)

* Please make sure that the details above have been filled before signing this form to confirm its validity.

Full name:		Signature*:	
Address:			
		Postcode:	
Amount Pledged:	Amount collected:	Date Given:	Gift Aid (please tick)

* Please make sure that the details above have been filled before signing this form to confirm its validity.

Sponsorship Form Template continued

Sponsorship form for:			
Full name:		Signature*:	
Address:			
		Postcode:	
Amount Pledged:	Amount collected:	Date Given:	Gift Aid (please tick)
* Please make sure that the details above have been filled before signing this form to confirm its validity.			
Full name:		Signature*:	
Address:			
		Postcode:	
Amount Pledged:	Amount collected:	Date Given:	Gift Aid (please tick)
* Please make sure that the details above have been filled before signing this form to confirm its validity.			
Full name:		Signature*:	
Address:			
		Postcode:	
Amount Pledged:	Amount collected:	Date Given:	Gift Aid (please tick)
* Please make sure that the details above have been filled before signing this form to confirm its validity.			
Full name:		Signature*:	
Address:			
		Postcode:	
Amount Pledged:	Amount collected:	Date Given:	Gift Aid (please tick)
* Please make sure that the details above have been filled before signing this form to confirm its validity.			
Full name:		Signature*:	
Address:			
		Postcode:	
Amount Pledged:	Amount collected:	Date Given:	Gift Aid (please tick)
* Please make sure that the details above have been filled before signing this form to confirm its validity.			