

Sponsorship form

NAME AND DATE OF EVENT: _____

NAME OF PARTICIPANT: _____

GIFT AID DECLARATION: 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 littlelifts 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.

REMEMBER: You must provide your full name, home address, postcode & tick Gift Aid for littlelifts to claim tax back on your donation.

NAME	ADDRESS	POSTCODE	AMOUNT	GIFT AID (PLEASE TICK)	DATE PAID
TOTAL DONATIONS RECEIVED					
TOTAL GIFT AID DONATIONS					
DATE DONATIONS GIVEN TO LITTLELIFTS					

