

SPONSORSHIP & GIFT AID DECLARATION FORM

(PLEASE PHOTOCOPY A BLANK FORM AS REQUIRED)

NAME OF PARTICIPATING RIDER & STRIDER: ADDRESS & POST CODE: PHONE No: EMAIL ADDRESS:	Number in group: Number of churches visited: BIKE WALK OTHER	NAME & ADDRESS OF CHURCH YOU WISH TO RECEIVE HALF YOUR SPONSORSHIP MONEY:
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Those donating electronically via 'JustGiving', (see our Information and Sponsorship form or web site) should ensure that they identify clearly the church and its full address to which they are donating.

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 the charity named above 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 the Gift Aid claimed on all 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.

SPONSORS should complete every column in full - THIS IS A LEGAL REQUIREMENT to recover Gift Aid.

Full Name	House No. or Name	Post Code	Amount Pledged	Gift Aid (✓)	Date Paid	Amount collected	
						CASH	CHEQUES <small>only payable to 'HIHCT'</small>
Anthony Other	25	ZX24 6ZA	£15.00	✓		£15.00	
'Just Giving' Donations to date						£	

Registered Charity No. 299633

Form Ref (to be completed by HIHCT)

PTO

Total Donations
£

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PLEASE PRINT CAREFULLY

ONLY TICK THIS COLUMN IF YOU PAY TAX

PLEASE GIVE THIS **ACTUAL FORM** TO YOUR CHURCH REPRESENTATIVE FOR THE INLAND REVENUE
DETAILS BELOW TO BE COMPLETED BY HAMPSHIRE & THE ISLANDS HISTORIC CHURCHES TRUST

DATE MONIES RECEIVED

TOTAL GIFT AID DONATIONS

X22/78

TAX RECLAIMABLE
£

FORM REF