



SPONSORSHIP & GIFT AID DECLARATION FORM

NAME OF PARTICIPANT, ADDRESS & POST CODE: _____

Number in Group: _____

Number of churches visited: _____

BIKE WALK OTHER

Phone No: _____ **EMAIL ADDRESS:** _____

NAME & ADDRESS OF CHURCH YOU WISH TO RECEIVE HALF YOUR SPONSORSHIP MONEY:

OR DONATE ALL YOUR SPONSORSHIP DONATIONS TO THE TRUST

Those donating electronically via 'GoodHub', visit our website to get link, should ensure that they identify clearly the church and its address to which they are donating.

Note to Sponsors: If I have ticked the box 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 gain tax in the current tax year than the amount of Gift Aid claimed on all my donations it is my responsibility to pay the difference. I understand the charity will reclaim 25p of tax on every £1 given

Full Name req'd for Gift Aid	House No. or Name req'd for Gift Aid	Post Code req'd for Gift Aid	Amount Pledged	Gift Aid (✓)	Date Paid	Amount Collected	
						CASH	CHEQUES <small>payable to HIHCT R&S</small>
						Cash Total	Cheques Total
						£	£
						Total Donations	
						£	

Form Ref (to be completed by HIHCT)

Registered Charity No. 1181370

PTO

