Sponsorship form

Martlets
life-changing hospice care

Name

Is undertaking _____
for Martlets. Their efforts combined with your generosity will enable us to continue providing life-changing hospice care to those living in and around Brighton and Hove.

Name	Address – we need your home address **including postcode** to reclaim tax under the Gift Aid Scheme.	Home Postcode							Amount	*Treat as Gift Aid	Paid
Mr Fred Bloggs	1 The Street, Townplace, County	B	N	3		7	D	X	£10.00	✓	✓

giftaid it

***GIFT AID: please tick the box if you would like us to claim gift aid on your donation.** If you are a UK tax payer, the value of your donation to us can increase by at least 25% under the Gift Aid scheme – at no additional cost to you! By ticking the 'gift aid' box, you confirm that you have paid an amount of income or capital gains tax at least equal to the tax we reclaim on your donation. **We can only claim Gift Aid if your name, home address and postcode are shown.**

Please return this form to:
Martlets Fundraising
270-274 Old Shoreham Road
Hove, East Sussex, BN3 7DX

www.themartlets.org.uk
Registered Charity No: 802145

Registered with FUNDRAISING REGULATOR

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