

## Sponsorship and Gift Aid Declaration Form

Please sponsor me (name) \_\_\_\_\_

To (event) \_\_\_\_\_

In aid of \_\_\_\_\_

**Please make cheques payable to NNUH NHS Foundation Trust Charitable Fund (please specify if you want it to support a specific department)**

**Please send all cheques along with your sponsor forms and your name to Fundraising Office, Finance, NNUH, 20 Rouen Road, Norwich, Norfolk, NR1 1QQ.**

**If you would like any further information or help please call 01603 287107 or email [fundraising@nnuh.nhs.uk](mailto:fundraising@nnuh.nhs.uk)**

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 I must pay an amount of Income Tax and/or Capital Gains Tax in the tax year at least equal to the amount of tax that all the charities I donate to, will reclaim on my gifts for that tax year. I understand that other taxes such as VAT and Council Tax do not qualify. I understand the charity will reclaim 25p of tax on every £1 that I have given.

<b>Full Name</b>	<b>Home Address</b> (please do not put your work address here)	<b>Postcode</b>	<b>Amount £</b>	<b>Date Paid</b>	<b>Gift Aid?</b>
<i>eg Jane Smith</i>	<i>123, Anywhere, Norwich</i>	<i>NR1 1AB</i>	<i>10.00</i>	<i>1/2/13</i>	<i>✓</i>

Name	Home Address (please do not put your work address here)	Postcode	Amount £	Date Paid	Gift Aid?
Total donations received		£			
Total Gift Aid donations		£			
Date donations given to charity					