

ROYAL NATIONAL HOSPITAL FOR RHEUMATIC DISEASES CHARITABLE FUND (1054247)

SPONSORSHIP AND GIFT AID DECLARATION FORM

PLEASE SPONSOR ME:

TO (EVENT):

IN AID OF:

We, who have given our names and addresses below and have ticked the box headed 'Gift Aid? (3)', want the charity or CASC named above to reclaim tax on the donation detailed below, given on the date shown. We understand that each of us must pay an amount of income tax or capital gains tax at least equal to the tax reclaimed by the charity or CASC on the donation

Full name (First name and surname)	Home address Not your work address (this is essential for Gift Aid)	Postcode	Amount£	Date paid	Gift Aid? √
Total donations received			£		
Total Gift Aid donation			£		

Once you have collected all your sponsorship money, please return this form and the funds to:
 The Fundraising & Communications Officer, Royal National Hospital for Rheumatic Diseases, Upper Borough Walls, Bath, BA1 1RL
 Cheques should be made payable to **Royal National Hospital for Rheumatic Diseases** (1054247)

