giftaid it

Chamwell Centre
Overcoming disability in Gloucestershire

Sponsorship and Gift Aid declaration form

Please sponsor me _____

To take part in _____

In aid of **The Chamwell Centre Charity**

We, who have given our names and addresses below and have ticked the box headed 'Gift Aid' want the charity 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.

Full name (First name and surname)	**Home address** (Not work address)	**Postcode**	**Amount £**	**Date paid**	**Gift aid** (please tick)

Full name (First name and surname)	**Home address** (Not work address)	**Postcode**	**Amount £**	**Date paid**	**Gift aid** (please tick)

Total donations received £	
Total Gift Aid donation £	

giftaid it

Thank you for your support

Chamwell Centre
Overcoming disability in Gloucestershire