

Sponsorship form

NAME OF PARTICIPANT
THE FOLLOWING PEOPLE ARE SPONSORING ME TO
ON
(PLEASE COMPLETE THIS FORM USING BLOCK CAPITALS AND BLACK INK)

If I have ticked the box headed 'Gift Aid? \(\sigma^{\text{I}}, \) I confirm that I am a UK Income or Capital Gains taxpayer. I have read this statement and want Endometriosis UK to reclaim tax on the donation detailed below, given on the date shown. I understand that if I pay less Income Tax / or Capital Gains tax in the current tax year than the amount of Gift Aid claimed on all of my donations it is my responsibility to pay any difference. I understand the charity will reclaim 25p of tax on every £1 that I have given.

NAME	HOME ADDRESS This is very important to enable us to claim the tax on your donation.	POSTCODE	AMOUNT PLEDGED	AMOUNT COLLECTED	DATE GIVEN (dd/mm/yy)	giftaidit GIFT AID? (please tick)	I WOULD LIKE TO HEAR MORE FROM ENDOMETRIOSIS UK. MY EMAIL ADDRESS IS
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