



# Team Sponsor form

## Sunday 11<sup>th</sup> October 2020

Family Surname: \_\_\_\_\_

Lead family member name: \_\_\_\_\_

Family members: Walker no:  Unique Supporter ref:

Name: \_\_\_\_\_ Walker no:  Unique Supporter ref:

Name: \_\_\_\_\_ Walker no:  Unique Supporter ref:

Name: \_\_\_\_\_ Walker no:  Unique Supporter ref:

Name: \_\_\_\_\_ Walker no:  Unique Supporter ref:

Name: \_\_\_\_\_ Walker no:  Unique Supporter ref:

Name: \_\_\_\_\_ Walker no:  Unique Supporter ref:

Name: \_\_\_\_\_ Walker no:  Unique Supporter ref:

For office use only

*giftaid it*

	Full name	Home address	Postcode	Amount
0	Mrs S Walker	1 Walk Lane, Step Town	WA1 1J7	£50.00
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

Tick this box when funds received

**Use Gift Aid to boost your donation by 25p of Gift Aid for every £1 you donate**  
 By ticking this Gift Aid box, I confirm I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference. I understand the charity will reclaim 25p of tax on every £1 that I have given in the last 4 tax years, on this gift and all future gifts until we tell you otherwise.  
**Tick the box to Gift Aid your donation**

**Return your donations and this form to:** Farleigh Hospice, North Court Road, Chelmsford CM1 7FH  
 A receipt will be issued for all donations to the participant named at the top of this form. **Thank you!**



# Sunday 11<sup>th</sup> October 2020

*giftaid it*  
See Gift Aid statement overleaf  
Tick the box to Gift Aid your donation

	Full name	Home address	Postcode	Amount	Tick this box when funds received
16				<input type="checkbox"/>	<input type="checkbox"/>
17				<input type="checkbox"/>	<input type="checkbox"/>
18				<input type="checkbox"/>	<input type="checkbox"/>
19				<input type="checkbox"/>	<input type="checkbox"/>
20				<input type="checkbox"/>	<input type="checkbox"/>
21				<input type="checkbox"/>	<input type="checkbox"/>
22				<input type="checkbox"/>	<input type="checkbox"/>
23				<input type="checkbox"/>	<input type="checkbox"/>
24				<input type="checkbox"/>	<input type="checkbox"/>
25				<input type="checkbox"/>	<input type="checkbox"/>
26				<input type="checkbox"/>	<input type="checkbox"/>
27				<input type="checkbox"/>	<input type="checkbox"/>
28				<input type="checkbox"/>	<input type="checkbox"/>
29				<input type="checkbox"/>	<input type="checkbox"/>
30				<input type="checkbox"/>	<input type="checkbox"/>
31				<input type="checkbox"/>	<input type="checkbox"/>
32				<input type="checkbox"/>	<input type="checkbox"/>
33				<input type="checkbox"/>	<input type="checkbox"/>
34				<input type="checkbox"/>	<input type="checkbox"/>
35				<input type="checkbox"/>	<input type="checkbox"/>
36				<input type="checkbox"/>	<input type="checkbox"/>
37				<input type="checkbox"/>	<input type="checkbox"/>
38				<input type="checkbox"/>	<input type="checkbox"/>
39				<input type="checkbox"/>	<input type="checkbox"/>
40				<input type="checkbox"/>	<input type="checkbox"/>
41				<input type="checkbox"/>	<input type="checkbox"/>
42				<input type="checkbox"/>	<input type="checkbox"/>
43				<input type="checkbox"/>	<input type="checkbox"/>
44				<input type="checkbox"/>	<input type="checkbox"/>
45				<input type="checkbox"/>	<input type="checkbox"/>

**GRAND TOTAL £** \_\_\_\_\_



Thank you for raising money to help people affected by life-limiting illnesses in mid Essex. It is because you care that we can.