Events For Bertie 23

Muscular Dystrophy Campaign

www.bertie23.co.uk

I am doing the following event(s):

SPONSORSHIP FORM

Name:

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

First and Last Name	Home Address (for Gift Aid)	Postcode	Amount (£)	Date Paid	Gift Aid? ✓

TOTAL DONATIONS RECEIVED _____