

**St Albans**



# Sponsorship and gift aid declaration form

<b>Sleeper's name:</b>		<b>Group:</b>	
<b>Sleeper's address:</b>		<b>Postcode:</b>	

**Please indicate the charity you are supporting:**

<b>Centre 33</b> Registered charity 1146438 2A Spicer St, St Albans AL3 4PQ	<b>Emmaus</b> Registered charity 1073808 Hill End Lane, St Albans AL4 0FE	<b>Herts Young Homeless</b> Registered charity 1069498 1st Floor Gracemead House, Woods Avenue, Hatfield AL10 8HX	<b>The Living Room</b> Registered charity 1175541 8-10 The Glebe, Chells Way, Stevenage SG2 0DJ	<b>Open Door</b> Registered charity 1028528 8 Brickett Road, St Albans AL1 3JX
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**\*\*Gift Aid declaration** - If I have ticked the box headed 'Gift Aid', I confirm that I am a UK Income or Capital Gains taxpayer. I have read this statement and want the charity named above to reclaim tax on the donation detailed below, given on the date shown. I understand that if I pay less Income Tax and/or Capital Gains Tax in the year than the amount of Gift Aid claimed on all of my donations then it is my responsibility to pay any difference. I understand that other taxes such as VAT and Council Tax do not qualify. I understand the charity will reclaim 25p of tax on every £1 that I donate.

Sponsor's name (Please PRINT)	Home address	Postcode (essential)	Amount donated £	Date given dd/mm/yy	Gift Aid Please TICK **
<b>Total donations received</b>			£	<b>Date donations given to charity</b>	
<b>Total Gift Aid donations</b>			£		

Please photocopy this form before you collect sponsors and attach copies to this original.