Sponsorship & Gift Aid Declaration Form for Caring Matters Now

(participants name)……..

Taking part in the _____on_____

Please complete all details in **BLOCK CAPITALS** and only tick the *Gift Aid box if you pay Income Tax or Capital Gains Tax equal to the tax reclaimed by us on the donation made.

Please print your **FULL NAME (in BLOCK CAPITALS)**	Please give your address and Post Code if we can reclaim tax on your donation **HOME ADDRESS (in BLOCK CAPITALS)**	FULL POST CODE **(essential)**	AMOUNT PLEDGED	AMOUNT RECEIVED	DATE RECEIVED (dd/mm/yy)	*GIFT AID (please tick)
			TOTAL			

To be completed by Caring Matters Now: Date monies received_____: Total amount Gift Aid Donations £_____x 20/80= £_____ tax reclaimable

Charity number: 1120988 *www.caringmattersnow.co.uk*

Caring Matters Now, Bridge Chapel Centre, Heath Road, Liverpool, L19 4XR