

Sponsorship Form

Name of Fundraiser.....
 Address
 Postcode
 Telephone.....
 Email
 Team Name (if applicable).....

For NLH only:

Total amount raised	
Total eligible for Gift Aid	
Date received	
Date processed	

Please return this form together with your donations to:
North London Hospice, 47 Woodside Avenue, London N12 8TT

Cheques must be made payable to 'North London Hospice' and cash sent in sealed envelope.

Full name	Home address (not work – essential for Gift Aid)	Postcode	Amount (£)	*Gift Aid (✓)	Date paid?
e.g. John Smith	31 High Road, London	AB1 2CD	£10	✓	01/02/03
Subtotal:					
TOTAL					

*Gift Aid is reclaimed by North London Hospice from the tax you pay. Your name and address is needed to identify you as a current UK taxpayer. I would like to Gift Aid my donation to North London Hospice and any qualifying donations I make in the future, or have made in the past 4 years to North London Hospice. 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. Please notify North London Hospice if you wish to cancel this declaration, change your name or address or no longer pay sufficient tax on your income and/or capital gains.

