



NEWARK RUGBY UNION FOOTBALL CLUB

Mini & Youth Fundraising Sponsorship Form BUILDING OUR FUTURE FUND

giftaid it



Name of Participant:	Sponsored Event:	Supervising Adult:	Target Amount:
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If I have ticked the box headed Gift Aid? \checkmark , I confirm that I am a UK Income or Capital Gains taxpayer. I have read this statement and want the Charity or Community Amateur Sports Club (CASC) named above to reclaim tax on the donation detailed below, given on the date shown. I understand that I must pay an amount of Income Tax and/or Capital Gains Tax in the year at least equal to the amount of tax that all the charities and CASCs I donate to, will reclaim on my gifts for that tax year. I understand that taxes such as VAT and Council Tax do not qualify. I understand the charity will reclaim 25p of tax on every £1 that I give.

REMEMBER: Full name + Home address + Postcode + \checkmark = *giftaid it*

Full Name (First name & Surname)	Home address (Only needed if you are Gift Aiding your Donation), Please don't put your work address here	Postcode	Amount £	Date Paid	GIFT AID \checkmark
TOTAL DONATIONS RECEIVED			£		
TOTAL GIFT AID DONATIONS			£		
DATE DONATIONS GIVEN TO CHARITY or CASC					

PLEASE ATTACH ALL SHEETS TOGETHER and HAND IN WITH THE DONATIONS

CONTINUATION PAGE (see Main Page for Gift Aid notes)

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