



<p><u>For office use only</u></p> <p>RE number: _____</p> <p>Total received: _____</p> <p>Gift Aid: _____</p>

St Clare Hospice Sponsorship Form

I am raising money for St Clare Hospice (registered charity number 1063631), who provides care for people with life-limiting illnesses. It costs in excess of £2.5 million per year for St Clare Hospice to provide care to patients and their families throughout West Essex and East Hertfordshire, so please give generously.

I'm raising money by running or walking 4k dressed as Santa for St Clare Hospice on Sunday 6th December 2009!

Name: _____	Date of Birth: ___/___/___
Address: _____	
Contact number: _____	Email: _____

giftaid it Gift Aid allows St Clare Hospice to claim an extra 28p per £1 from the Inland Revenue. To qualify for Gift Aid, you must pay an amount of Income Tax and/or Capital Gains Tax at least equal to the tax that we will reclaim on your donation in the appropriate tax year. Please tick the Gift Aid box and **state your full address and postcode**. If your name or address changes, please do inform us.

Name <small>To claim Gift Aid, we must have at least your first initial and surname</small>	Gift Aid <small>Y/N</small>	Full Address <small>This must be your HOME address and include your postcode so that we can claim Gift Aid. We will not use this data for mailings unless granted permission in the fifth column.</small>	Donation amount	Would you like to receive news on St Clare Hospice and its events? <small>Y/N</small>	Date donation received

Please make cheques payable to **St Clare Hospice**. Once you have collected your sponsors, please send your donation and this form to St Clare Hospice, Hastingwood Road, Hastingwood, Essex, CM17 9JX.

