

Sponsorship & Gift Aid Declaration Form

Please sponsor me (name): _____

To participate in (event name): _____

Date: _____ Donor number (AFR): _____

Address: _____

Postcode: _____

Telephone: _____ Email: _____

I am happy for KSSAAT to contact me by email

*INCREASE YOUR GIFT AT NO COST TO YOU

Add 25p to every £1 you donate

- at no extra cost to you

(Please tick) I am a UK tax payer and I would like the Kent, Surrey & Sussex Air Ambulance Trust to reclaim the tax on all qualifying gifts of money made today, and in the past 4 years and in the future. I can confirm I have paid or will pay an amount of Income Tax and/or Capital Gains Tax for each tax year/s (6 April to 5 April) that is at least equal to the amount of tax that all the charities or Community Amateur Sports Clubs (CASCs) that I donate to will reclaim on my gifts for that tax year. 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 give. **If you are the participant** tick the box to gift aid any donations you make . **If you are a sponsor tick below.**

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DATA OPT-IN

KSSAAT takes data protection seriously.

We will not pass your details to other organisations. We only record your details for the purposes of sending you information about our work and that of our trading company. If the participant wishes to receive further information please tick here . If you are a sponsor please tick the box below

Title	First Name	Surname	Full Home Address + Postcode NOT your work address (this is essential for Gift Aid)	Amount pledged	Gift Aid*? ✓	Paid?	Contact?
				£			
				£			
				£			
				£			
				£			
				£			
				£			
				£			
				£			
				£			
				£			
				£			
Page total				£			

OFFICE USE ONLY Total Gift Aid: £ _____ Total donations including non Gift Aid: £ _____



