

Sponsorship Form



THE **BUTTERFLY** TRUST
HOSPICE
 Your local hospice for local people

Name:

Telephone No:

Address:

Postcode:

Email:



*Do you pay tax? If so, your gift will be worth 25% more to us- **at no extra cost to you!**
 All you have to do is **tick the box** under 'Gift Aid', and the tax office will give 25p for every £1 you donate*
 We need your full name, address and postcode in order to claim Gift Aid on your donation*



Full Name	Home Address	Postcode	Amount Pledged (£)	Amount Collected (£)	Tick for more info	Gift Aid ✓

*By ticking the Gift Aid box, I confirm I am a UK taxpayer and I would like The Butterfly Hospice Trust to claim Gift Aid on my donation. I understand that I must pay an amount of Income Tax and/or Capital Gains Tax for each tax year (6th April to 5th April) that is at least equal to the amount of tax that The Butterfly Hospice Trust will reclaim on my gifts for that tax year.



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FINAL TOTAL:	PAGE NO:
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