PLEASE SPONSOR ME

TEENAGE CANCER TRUST

Name _____

To (event) _____ **In aid of Teenage Cancer Trust**

If I have ticked the box headed 'Gift Aid? ✓', I confirm that I am a UK Income or Capital Gains taxpayer. I have read this statement and want Teenage Cancer Trust to reclaim tax on the donation detailed below, given on the date shown. I understand that if I pay less Income Tax or Capital Gains tax in the current tax year than the amount of Gift Aid claimed on all of my donations it is my responsibility to pay any difference. I understand Teenage Cancer Trust will reclaim 25p of tax on every £1 that I have given.

Remember: You must provide your full name, home address, postcode & '✓' Gift Aid for Teenage Cancer Trust to claim tax back on your donation.

giftaid it

We'd like to let you know the difference your support has made, what we do and how else you can support us. If you are happy to hear from us please tick the 'further info' box below.

Sponsors Full Name (first name and surname)	**Sponsor's Home address** (Only needed if are Gift Aiding your donation. Don't give your work address if you are Gift Aiding your donation)	**Postcode**	**£Amount**	**Date Paid**	**Gift Aid?** ✓	**Further Info**
John Smith	1 Example Rd, London	EX4 MPL3	£20	10/10/17	✓	✓

If I have ticked the box headed 'Gift Aid? ✓', I confirm that I am a UK Income or Capital Gains taxpayer. I have read this statement and want Teenage Cancer Trust to reclaim tax on the donation detailed below, given on the date shown. I understand that if I pay less Income Tax or Capital Gains tax in the current tax year than the amount of Gift Aid claimed on all of my donations it is my responsibility to pay any difference. I understand Teenage Cancer Trust will reclaim 25p of tax on every £1 that I have given.

Remember: You must provide your full name, home address, postcode & '✓' Gift Aid for Teenage Cancer Trust to claim tax back on your donation.

giftaid it

We'd like to let you know the difference your support has made, what we do and how else you can support us. If you are happy to hear from us please tick the 'further info' box below.

Sponsors Full Name (first name and surname)	**Sponsor's Home address** (Only needed if are Gift Aiding your donation. Don't give your work address if you are Gift Aiding your donation)	**Postcode**	**£Amount**	**Date Paid**	**Gift Aid?** ✓	**Further Info**
John Smith	1 Example Rd, London	EX4 MPL3	£20	10/10/17	✓	✓