THE NATIONAL HOLIDAY FUND
FOR SICK AND DISABLED CHILDREN

Registered Charity No 327714

www.nhfcharity.co.uk

SPONSORSHIP AND GIFT AID DECLARATION FORM

NAME (OF PERSON TO BE SPONSORED): .....

EVENT & DATE:.....

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 the Charity 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 tax 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 VAT and Council Tax do not qualify. I understand the Charity will reclaim 25p of tax for every £1 that I have given.

***These fields must be completed to enable the Charity to claim Gift Aid**
(please do NOT use your workplace address)

Initials*	Surname *	House Name or Number*	Post Code	Date* (dd/mm/yy)	Amount	Gift Aided √	Signed*

Total Donations received £…… Total Gift Aid donations £……

Date donations given to Charity……

NB The NHF will only use this information for claiming 'Gift Aid'