

# Sponsorship and Gift Aid declaration form



*giftaid it*

Name:

Event:

**Make your donation go further**

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 Deafblind UK 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 the charity will reclaim 25p of tax on every £1 that I have given.

Full Name	Home Address (essential for Gift Aid)	Postcode (essential)	Amount (£)	Date paid	Gift Aid (✓)
A Sponsor	1 Donation Road, Hampton, Peterborough	PE7 8FD	10.00	14.02.19	✓

Fundraiser: please turn over and complete totals to validate Gift Aid.

Name:

Event:



Full Name	Home Address (essential for Gift Aid)	Postcode (essential)	Amount (£)	Date paid	Gift Aid (✓)
<b>Total donations received</b>		£			
<b>Total Gift Aid Donations</b>		£			
<b>Date donations given to Deafblind UK</b>					

Please note that the data collected on this form will be held securely on Deafblind UK's database. We operate a Data Retention Policy to ensure that data is not held for longer than necessary, if you would like to request a copy please email [feedback@deafblind.org.uk](mailto:feedback@deafblind.org.uk).

If you no longer wish us to hold your information you can tell us anytime by contacting 01733 358100 or emailing [unsubscribe@deafblind.org.uk](mailto:unsubscribe@deafblind.org.uk)

 0800 132320

 07950 008870

 DBUKcharity

 [fundraising@deafblind.org.uk](mailto:fundraising@deafblind.org.uk)

 [www.deafblind.org.uk](http://www.deafblind.org.uk)

 @DeafblindUK



Registered Charity number: 802976