SPONSORSHIP FORM

Page: ____ of ____

Title:

Forename: Tel:

Surname: email:

Home Address:

Postcode:

Event Title:

Does you employer have a match giving scheme to match the amount you raise? Yes ☐ No ☐

If Yes

Employer name:

Contact Details:

giftaid it

Full Name + Home Address + Postcode + ✓ = Gift Aid

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 Team Rubicon to reclaim tax on the donations detailed below, given on the date shown. I understand that if I pay less Income/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 the difference. I understand that the charity will reclaim 25p of tax on every £1 that I have given.

Full Name	Home Address	Postcode	£ Pledged	£ Recieved	Date Given	Gift Aid ✓	I **DO** want to be contacted by Team Rubicon in the future

www.teamrubiconuk.org

Please return this form with your sponsorship money to:
Team Rubicon UK, Chilmark, Wiltshire, SP3 5DU

fundraising@teamrubiconuk.org 0300 330 9488

All the data we hold is gathered and managed in strict accordance with the Data Protection Act (1998).
We will not disclose any information supplied by you to any third party organisations

Team Rubicon UK is a registered charity in England & Wales (1163214)

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Page: ____ of ____

Event Title: _____

TEAM RUBICON®
DISASTER RESPONSE

giftaid it

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