



# ST CLARE HOSPICE

# Sponsor Form

I am raising money for St Clare Hospice, who provides care for people with life-limiting illnesses throughout West Essex and East Hertfordshire. The Hospice currently only receives 24% from the NHS towards their £2.7m annual running costs, that is £5,414 a day they have to raise! Please do give generously so that they can continue to fund their caring work.

**For office use only**

RE: \_\_\_\_\_

Total received: \_\_\_\_\_

Gift Aid: \_\_\_\_\_

I am raising money for St Clare Hospice by \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

Contact number: \_\_\_\_\_ Email: \_\_\_\_\_



\*I have ticked the box headed Gift Aid and I confirm that I am a UK Income or Capital Gains taxpayer. I have read this statement and want St Clare Hospice 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 Community Amateur Sports Club (CASCs) I donate to, will reclaim on my gifts for that tax year. I understand that other taxes such as VAT and Council Tax do not qualify. I understand the charity will reclaim 25p of tax on every £1 that I have given.

| NAME<br>To enable us to claim Gift Aid, this must be your first name and surname |         | Gift Aid*<br>Y/N | HOME ADDRESS<br>This must be your HOME address and include your postcode so that we can claim Gift Aid. We will not use this data for mailings unless granted permission in the fifth column. |          | Donation amount | Would you like to receive news on St Clare Hospice and its events?<br>Y/N | Donation received? |
|--|---------|------------------|---|----------|-----------------|---|--------------------|
| First name   | Surname |                  | House number or name  | Postcode |                 |   |                    |
| John   | Example | Y                | 12  | CM17 1AB | £20             | Y   | Yes                |
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Please make all cheques payable to **St Clare Hospice**. Once your event is over, please send your donation and this sponsor form to St Clare Hospice, Hastingwood Road, Hastingwood, Essex, CM17 9JX.



