WILTSHIRE HISTORIC CHURCHES TRUST

RIDE + STRIDE SPONSORSHIP FORM 13th SEPTEMBER 2014

Title: First name: Surname:	For age group prizes, please state age:	Home Address, including postcode:						
Parental consent for under 18s Signature:		Name & address of your Parish Organiser:						
Church you wish to support:		rches & Cha						
Church	the ste		. If no-one is present, pleas	Time	self.			
			Gitti Ch		Initials			
		_						

Total churches visited:

Total money remitted:

Please return this form with your money to your Parish Organiser by SUNDAY 12th OCTOBER

Sponsors

Please tick the **Gift Aid** box if you are able to, so that we can claim an extra 25% on your donation.

If you intend to pay by CAF voucher, do **not** tick the Gift Aid box. 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 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 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.

Surname & Initials Please write legibly	Home address Not work address. Please write legibly	Post Code	Gift Aid √	Amount pledged	Total given	Date given
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		•	Tot	Total received:		