

**Essex & Herts Air Ambulance****Event Sponsorship and Gift Aid Declaration Form**

Essex &amp; Herts Air Ambulance, Flight House, The Business Centre, Earls

Colne Business Park, Earls Colne, Colchester, Essex CO6 2NS

Email [events@ehaat.org](mailto:events@ehaat.org)Website [www.ehaat.org](http://www.ehaat.org)

Telephone 0345 2417 690

**Essex & Herts  
Air Ambulance**

Your local life-saving charity

**Sponsored  
Event**

MCR &amp; Family Fun Day

**Event  
Date**Sunday 20<sup>th</sup> May 2018

**Name:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Tel No:** \_\_\_\_\_  
 \_\_\_\_\_ **Post Code:** \_\_\_\_\_

**I am raising money in aid of Essex & Herts Air Ambulance**

<b>Sponsor's Full Name</b> (First name & surname)	<b>Sponsors Home Address</b> <i>Only needed if you are Gift Aiding your donation. Don't give your work address if you are Gift Aiding your donation</i>	Postcode	Donation Amount £	Date Collected	Gift Aid ✓
Mr Andrew Sample	123 The Avenue, Earls Colne Essex	AN12 32XY	£10.00	DD/MM/YY	✓

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 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.  
**Remember: You must provide your full name, home address, postcode & ✓ Gift Aid for the charity to claim tax back on your donation.**

