

Official Sponsorship Form

Title: _____ Name: _____

Company/Organisation (if applicable): _____

Address: _____

Postcode: _____

Daytime Tel: _____ Email: _____

Event or Challenge: _____

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*** YOUR TICK CAN HELP MIDLANDS AIR AMBULANCE CHARITY RAISE EVEN MORE MONEY:**

If your sponsorship donation is from taxed income, please place a tick in the box provided.
The Charity will then be able to reclaim tax on your donation from the Inland Revenue at no cost or inconvenience to you.
In order for us to claim Gift Aid we require your title, full name, home address and postcode, NOT works address.

TITLE	FIRST NAME	SURNAME	HOME ADDRESS	POSTCODE	£	RECLAIM GIFT AID*	PAID
Mr	John	Smith	123 Anytown Avenue, Local area	AB1 1CD	£25	✓	

Sub Total

MIDLANDS AIR AMBULANCE CHARITY
Gloucestershire • Herefordshire • Shropshire • Staffordshire
West Midlands • Worcestershire

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Call 0800 8 40 20 40
or visit www.midlandsairambulance.com



