

ONE BIG WALK SPONSORSHIP FORM

Name	<input type="text"/>	Phone	<input type="text"/>
Address	<input type="text"/>		
Event	<input type="text"/>	Post Code	<input type="text"/>
Email	<input type="text"/>	Hear From Us?	<input type="checkbox"/>

giftaid it

Make every £1 worth
25p more at no extra
cost to you

If I have ticked the box headed 'Gift Aid' I confirm:

- I am a UK taxpayer
- I would like Scarborough & District Mencap to claim back the tax on this donation and all donations I have made for the four years prior to this date, and all future donations until I notify Mencap otherwise
- I understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in the year, it is my responsibility to pay the difference.
- I will tell Mencap if I am no longer eligible to claim Gift Aid or if my name or address change.
- I understand that I cannot Gift Aid any donations made by, or on behalf of a group, company or someone else.

Title	First Name	Surname	House Name or Number	Postcode	Date of Donation	Your Donation	Gift Aid	Hear from S&D Mencap
Please fill in your name and address in your own writing and include your home address (not work address)								
Mr.	John	Smith	60	YO11 2JE	07/06/2025	£20.00	✓	✓



**Make every £1 worth
25p more at no extra
cost to you**

If I have ticked the box headed 'Gift Aid' I confirm:

- I am a UK taxpayer
- I would like Scarborough & District Mencap to claim back the tax on this donation and all donations I have made for the four years prior to this date, and all future donations until I notify Mencap otherwise
- I understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in the year, it is my responsibility to pay the difference.
- I will tell Mencap if I am no longer eligible to claim Gift Aid or if my name or address change.
- I understand that I cannot Gift Aid any donations made by, or on behalf of a group, company or someone else.

Title	First Name	Surname	House Name or Number	Postcode	Date of Donation	Your Donation	Gift Aid	Hear from S&D Mencap
-------	------------	---------	----------------------	----------	------------------	---------------	----------	----------------------

Please fill in your name and address in your own writing and include your home address (not work address)

I'VE RAISED A TOTAL OF

£

FOR OFFICIAL USE ONLY

Date Monies Received

Total Gift Aid Donations

Tax Reclaimable

£

£