

The Fire Fighters Charity Sponsorship Form

Your Details

Name: Tel/Mob:

Address: Postcode:

Email: Event name: Event date:

Please tick here to Gift Aid your donation.
By ticking this box The Fire Fighters Charity can claim an extra 25p in every pound, from HM Revenue & Customs, at no extra cost to you. To qualify for Gift Aid, what you pay in income tax or capital gains must be at least equal to the amount we will claim on your donation in the tax year.

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Title	First Name	Surname	Home Address	Home Postcode	Gift Aid?	Q1*	Amount Pledged	Amount Given
Mr	John	Smith	10 Any Street, Any Town, Any County	ABCD 123	<input checked="" type="checkbox"/>		£10.00	£10.00
Provide FULL TITLE for Gift Aid	Please provide FULL FIRST NAME for Gift Aid	Please provide FULL SURNAME for Gift Aid	Please provide FULL ADDRESS for Gift Aid	Please provide FULL HOME POSTCODE for Gift Aid	Please tick for Gift Aid			
Provide FULL TITLE for Gift Aid	Please provide FULL FIRST NAME for Gift Aid	Please provide FULL SURNAME for Gift Aid	Please provide FULL ADDRESS for Gift Aid	Please provide FULL HOME POSTCODE for Gift Aid	Please tick for Gift Aid			
Provide FULL TITLE for Gift Aid	Please provide FULL FIRST NAME for Gift Aid	Please provide FULL SURNAME for Gift Aid	Please provide FULL ADDRESS for Gift Aid	Please provide FULL HOME POSTCODE for Gift Aid	Please tick for Gift Aid			
Provide FULL TITLE for Gift Aid	Please provide FULL FIRST NAME for Gift Aid	Please provide FULL SURNAME for Gift Aid	Please provide FULL ADDRESS for Gift Aid	Please provide FULL HOME POSTCODE for Gift Aid	Please tick for Gift Aid			
Provide FULL TITLE for Gift Aid	Please provide FULL FIRST NAME for Gift Aid	Please provide FULL SURNAME for Gift Aid	Please provide FULL ADDRESS for Gift Aid	Please provide FULL HOME POSTCODE for Gift Aid	Please tick for Gift Aid			
Provide FULL TITLE for Gift Aid	Please provide FULL FIRST NAME for Gift Aid	Please provide FULL SURNAME for Gift Aid	Please provide FULL ADDRESS for Gift Aid	Please provide FULL HOME POSTCODE for Gift Aid	Please tick for Gift Aid			
Provide FULL TITLE for Gift Aid	Please provide FULL FIRST NAME for Gift Aid	Please provide FULL SURNAME for Gift Aid	Please provide FULL ADDRESS for Gift Aid	Please provide FULL HOME POSTCODE for Gift Aid	Please tick for Gift Aid			
Provide FULL TITLE for Gift Aid	Please provide FULL FIRST NAME for Gift Aid	Please provide FULL SURNAME for Gift Aid	Please provide FULL ADDRESS for Gift Aid	Please provide FULL HOME POSTCODE for Gift Aid	Please tick for Gift Aid			
Provide FULL TITLE for Gift Aid	Please provide FULL FIRST NAME for Gift Aid	Please provide FULL SURNAME for Gift Aid	Please provide FULL ADDRESS for Gift Aid	Please provide FULL HOME POSTCODE for Gift Aid	Please tick for Gift Aid			
Provide FULL TITLE for Gift Aid	Please provide FULL FIRST NAME for Gift Aid	Please provide FULL SURNAME for Gift Aid	Please provide FULL ADDRESS for Gift Aid	Please provide FULL HOME POSTCODE for Gift Aid	Please tick for Gift Aid			

Sheet number _____ of _____ total sheets

Total Collected

Q1*Data Protection:
Your information will be used to fulfil your request. Your details may also be used to keep you informed about the Charity
Please tick this box if you do not want us to contact you.



