

Sponsorship form



Event name _____

Event date _____

Name _____

Address _____

Telephone _____

Email _____

Suffolk Mind
 Caretakers House
 26 High Road West
 Felixstowe
 IP11 9JB

0300 111 6000

www.suffolkmind.org.uk

Full name (Please print)	Home address (Please print) Rather than your work address (this is essential for Gift Aid)	Postcode	Donation Amount (£)	Date paid	Gift Aid? * Please tick

*By ticking the box you have agreed that you are a UK Income or Capital Gains taxpayer, and that you want Suffolk Mind to reclaim tax on your donation detailed, given on the date shown. You understand that you must pay an amount of Income Tax and/or Capital Gains Tax in the tax year at least equal to the amount of tax that all the charities and Community Amateur Sports Clubs you donate to, will reclaim on my gifts for that tax year. You understand that other taxes such as VAT and Council Tax do not qualify.
By adding Gift Aid to your donation, it means that for every £1 you give, the Inland Revenue will give Suffolk Mind an extra 25p and it doesn't cost you a penny!



