



LEICESTER
HOSPITALS CHARITY
enhancing your hospitals

Registered Charity Number: 1056804



Sponsorship Form

Please Support Me

My Fundraising Activity

Please ask your sponsors to fill in the form below. We need their full name, house number and postcode to enable us to claim Gift Aid from the government. **We will not pass this information on to a third party.** You can read our Privacy Policy at www.lhcharity.org.uk/privacy.

Name	House Name/Number <small>Do not use work address</small>	Postcode	Donation (£) <i>giftaid it</i>	Signature	Opt In	Opt Out
Total:						

We can claim an extra 25p for every £1 donated and it doesn't cost a penny! (To enable us to claim Gift Aid the donor understands that if they pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all their donations in that tax year it is their responsibility to pay any difference)

By providing your signature and ticking the 'Opt In' box, you are giving Leicester Hospitals Charity permission to contact you in the future. By ticking the 'Opt Out' box, you are declining permission for us to contact you in the future.

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		Total:				

Please make cheques payable to 'Leicester Hospitals Charity' and return to **Leicester Hospitals Charity, Belgrave House, Leicester General Hospital, Leicester, LE5 4PW.** For other ways to pay in sponsorship monies, please visit our website or call our team.

Postcode		Office use only
Gift Aid		
Fund Number		