



Sponsorship Form

Your name: _____

Address: _____

Postcode: _____

Telephone: _____

giftaid it

Please tick below if you would like Healthy Minds to reclaim the tax you've paid on this donation. Please read the details and declaration at the bottom of the page. Remember: **You must provide your full name, home address, postcode and tick the 'Gift Aid' box for Healthy Minds to claim tax back on your donation.**

Full name (please PRINT).	Home address (please PRINT)	Postcode	Donation amount (£)	Date paid	Gift Aid? * (please tick)

*By ticking the box headed 'Gift Aid' I confirm that I am a UK Income or Capital Gains taxpayer. I have read this statement and want Healthy Minds to reclaim tax on the donation detailed above, given on the date shown. I understand that if I pay less Income Tax / or Capital Gains tax in the current tax year than the amount of Gift Aid claimed on all of my donations it is my responsibility to pay any difference. I understand that Calderdale Wellbeing (Healthy Minds) will reclaim 25p of tax on every £1 that I have given.