Sponsorship Form

Name of participant	
	DMWS
Event	Date

Gift Aid: (Make your donation worth 25% more. Please note, you must be a taxpayer paying more tax than the amount we reclaim in order for us to claim Gift Aid from your sponsorship)

Name	Address	Postcode (essential for Gift Aid)	Amount	Gift Aid (please tick)	Tick if Paid

Thank You for Your Help and Contributions