



# Jingle Jog 2024

## Sponsorship Form

Name:

Address (with postcode):

Email Address:

Full Name

Home Address

Postcode

Gift Aid\*

Amount

Collected

*John Smith*

*1, The Street, The Town*

*AB12 3CD*



Full Name

Home Address

Postcode

Gift Aid\*

Amount Collected

Full Name	Home Address	Postcode	Gift Aid*	Amount Collected

\* I confirm that I am a UK income or capital gains taxpayer. I have read this statement and want Frimley Health Charity to reclaim tax on my donation. I understand that I must pay an amount of income tax and/or capital gains tax in the tax year that is at least equal to the tax that Frimley Health Charity, and any other charities and CASCs I donate to, will reclaim on my donations for that tax year (council tax and VAT do not count). I understand the Frimley Health Charity will claim 25p in tax back for every £1 gift aided. Registered charity England and Wales 1049600.

Please pay all sponsorship money via your chosen payment method and return this form to The Fundraising Department, Frimley Park Hospital, Portsmouth Road, Frimley, Camberley, Surrey, GU16 7UJ. We will only use the details that you have provided for the purposes of administering your donation and for claiming Gift Aid. If you would like to know of other ways to improve patients lives, please contact our fundraising team on 0300 615 3206 or email [fhft.fundraising@nhs.net](mailto:fhft.fundraising@nhs.net).