Official Sponsorship Form

This form should not be used for door to door collections.

0600

Event: _____

First Name: _____ Surname: _____

Email: _____

Address: _____

_____ Postcode: _____

Telephone: _____ Mobile: _____

Organisation/School: (if applicable) _____

☐ Northern Ireland Children's Hospice would like to keep you informed about our work and our trading company. Please tick if you do not wish to receive further e-mails or telephone calls from Hospice.

giftaid it For every £1 you donate, Hospice can receive an extra 28p from the Inland Revenue. So, if you are a UK tax payer, just tick the 'Gift Aid' column - it's that simple, and won't cost you a penny.

Northern Ireland Children's Hospice

Head Office
18 O'Neill Road
Newtownabbey
BT36 6WB

T +44 (0)28 9078 1836
E fundraising@nihospice.org
nihospice.org

Name (please print)	**Full Address** (required for gift aid)	**Postcode**	**Date**	*giftaid it*	**Amount**

Remember: your £1 = £1.28 if you gift aid it

Cheques should be made payable to **Northern Ireland Children's Hospice** and sent to Head Office, 18 O'Neill Road, Newtownabbey BT36 6WB. Northern Ireland Hospice is a Company Limited by guarantee incorporated in Northern Ireland and is a charity recognised by the Inland Revenue. Company Registration No: 14817 Charity No: XN45696

Sub-total _____

Name (please print)	**Full Address** (required for gift aid)	**Postcode**	**Date**	*giftaid it*	**Amount**

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Total