



The Shakespeare Hospice **SPONSORSHIP FORM**

How you can make a difference

£10

could fund a memory making activity for a child facing bereavement

£99

could fund one hour of nursing care in a patient's own home

£63

could fund a counselling session for a patient or their loved one

£175

could fund a two hour bereavement support session for up to 8 children

Please sponsor me and help me reach my target of £

If you are a UK tax payer you can increase the value of your donations by 25%, at no extra cost to you. Please write your name and address with postcode and sign the Gift Aid column. Thank you!

	Name	Address	Postcode	Donation	Gift Aid Signature	email address	Date money received	Opt in for email
1								
2								
3								
4								
5								
6								
7								
8								



Charity no. 1064091

* If I have signed the column titled "Gift Aid Signature, I agree I am a UK Taxpayer and want The Shakespeare Hospice to treat all donations I have made for the past four years, and all future donations I make from the date of this declaration as Gift Aid Donations, until I notify you otherwise. I understand that I must pay an amount of Income Tax and/or Capital Gains Tax for each tax year that is at least equal to the amount of tax all Charities or Community Amateur Sports Clubs reclaim on my donations in the appropriate tax year. I understand that if I pay less Income and/or Capital Gains Tax to cover the amount of Gift Aid claimed on all my donations in that tax year, it is my responsibility to pay back any difference.

** By providing your email address and ticking opt in, you give us permission to contact you via email.

*** If you're happy for us to stay in touch by post, you don't need to do anything. If you do not wish to hear from us by post, please tick the 'Opt out of post' box. Children under 13 must obtain consent from a parent or guardian before providing personal information

For further details on how your personal information is used please visit www.theshakespearehospice.org.uk/privacy_policy

	Name	Address	Postcode	Donation	Gift Aid Signature	email address	Date money received	Opt in for email
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								

Campaign Number:

Total raised:

£

Sending your donations

Please send in your collected sponsor money along with this form to The Shakespeare Hospice, Fundraising Team, Church Lane, Shottery, Stratford upon-Avon, Warwickshire, CV37 9UL.

Cheques should be made payable to 'The Shakespeare Hospice'.
Alternatively you can call 01789 266852 and make a payment over the phone with your debit/credit card.

Dear Supporter, please fill in your details here so we can process your contributions.

Title First Name Surname

Address

..... Postcode

Email Phone

We'd like to keep you updated about our services and other ways you can support us in the future, whether that's through fundraising, volunteering or events. We promise that we will only communicate with you in the way you wish us to and will always respect your privacy.

I am happy for The Shakespeare Hospice to contact me by ☐ Email ☐ Post ☐ Phone ☐ SMS

If you are under 16 years old please tick here**** ☐

****Our fundraising events also request information about the participants. Anyone under the age of 16 must obtain parental or guardian consent before participating in an event organised by The Shakespeare Hospice. Children aged under 13 must obtain the consent of a parent or guardian before providing any personal information. For further details on how your personal information is used please visit www.theshakespearehospice.org.uk/privacy_policy. You can change your mind at any time about the ways we contact you by calling our Fundraising Team on 01789 266852 or emailing us at fundraising@theshakespearehospice.org.uk. You can also tell us if you no longer wish to hear from us.