



# St. Richard's Hospice Sponsorship Form



St. Richard's  
Hospice

CARING FOR LIFE

Reg. Charity No. 515668

Title: \_\_\_\_\_ Name: \_\_\_\_\_ Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

Company: \_\_\_\_\_ Event Name: June Skydive

What is the name of your Just Giving page?

\_\_\_\_\_   
 If you don't have one just go to [www.justgiving.com](http://www.justgiving.com) to create your own fundraising page

*giftaid it*

Full name + home address + postcode +  = Gift Aid

Full name	House name or number	Post code	* would you like to receive our enews?	Email address	Amount donated	Are you a tax payer?	Date money received
<i>First name and surname</i>	<i>House name or number</i>	<i>WR5 2QT</i>	<input checked="" type="checkbox"/>	<i>asample@email.co.uk</i>	<i>£5.00</i>	<input checked="" type="checkbox"/>	<i>01.01.17</i>

£5 will pay for a delicious and nutritious meal for our patients



£10 will give a patient an hour of care and emotional support at home



£20 will provide an hour's care in our In-patient Unit



Do you have a Forget Me Not tribute fund? If so please let us know the reference for funds to be allocated:



