Sponsorship Form

Title & First Name:

Surname:

House Number, Street:

Postcode:

Event Name :

Event Date :

williams SYNDROME FOUNDATION

Please send your completed form to:

Williams Syndrome Foundation

Suite 2367, 145 – 147 Boston Road

Ealing, London , W7 3SA

Please fill in the form with the amount you're giving and your home address. If you're a UK tax payer, please tick the Gift Aid box and each £1 you donate will be worth 25p more. Hooray!

Sponsors must complete their own details. Forms in the same handwriting are not valid for gift aid purposes.

Title	Full Name (First Name and Surname)	Postcode	Home Address (House Number, Street)	Amount	Gift Aid*	Date Collected
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			Total:			

Bank Transfers can be made to: Williams Syndrome Foundation - CAF Bank 40-52-40 - 00023062. Please don't send cash in the post.

Please make cheques payable to: **Williams Syndrome Foundation.**

Please email enquiries@williams-syndrome.org.uk with any enquiries.

* If I have ticked the box headed 'Gift Aid my donation', I confirm that I am a UK Income or Capital Gains taxpayer. I have read this statement and want WSF to reclaim tax on the donation detailed above, given on the date shown. I understand that if I pay less Income Tax/or Capital Gains tax in the current tax year than the amount of Gift Aid claimed on all of my donations it is my responsibility to pay any difference. I understand the charity will reclaim 25p on every £1 that I have given.

Thank you for supporting the Williams Syndrome Foundation!

By providing us with your personal data, you consent to the terms and conditions of our privacy notice available on www.williams-syndrome.org.uk