

# Sponsor

# form

Join our mission this Breast Cancer Awareness month, and help us support cancer patients and their loved ones in your community.

Name .....

I'm taking part in ..... On .....

I'm fundraising because .....

## How to get your money to us

Please fill this in when you have collected all your sponsorship money

First name ..... Surname .....

Address .....

..... Postcode .....

Email ..... Telephone .....

Please return your money to: Tenovus Cancer Care, Brunel House (15<sup>th</sup> Floor), 2 Fitzalan Road, Cardiff CF24 0EB. 029 2076 8863. Please make cheques payable to: **Tenovus Cancer Care**. However you choose to pay in your sponsorship please always remember to post back your sponsorship form so that we can claim Gift Aid on your donations.

## Join us!

Thank you for caring about people affected by cancer. We'd also like to keep you updated with our work, activities and ways to get involved.

How would you like to hear from us? Please tick all that apply.

☐ By email (this is the most cost-effective way for us to keep in touch) ☐ By phone ☐ By post ☐ By text

Tenovus Cancer Care promise to always keep your details safe and will never sell them. If you no longer want to hear from us, just email us at [preferences@tenovuscancercare.org.uk](mailto:preferences@tenovuscancercare.org.uk) or give us a call on 029 2076 8850. For more details visit our website for our Privacy Policy.

**tenovus**  
cancer care  
gofal cancer

**ON A MISSION**

For office use only

RE ref: .....

Income code: .....

Total banked: .....

Date: .....

Event ID: .....

Total Gift Aid donations

£.....



Cofrestrwyd gyda'r  
**FUNDRAISING  
REGULATOR**  
RHEOLEDDIWR CODI ARIAN

Fundraising for Tenovus Cancer Care.  
Reg Charity No. 1054015.

Sponsor

me

I'm

on a mission 

this Breast Cancer Awareness Month

Free money from the Taxman!

As long as you're happy with the statement below, please tick the Gift Aid box and allow us to claim an extra 25p for every £1 you donate.

By ticking the Gift Aid box you are agreeing to the following statement:

"I want to Gift Aid all donations to Tenovus Cancer Care today, in the past four years, and in the future. I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax in the current tax year than the amount of Gift Aid claimed on all my donations, it is my responsibility to pay any difference."

giftaid it

First name	Surname	House number or name	Address	Postcode	Amount donated	Date Paid	I want to <b>Gift Aid</b> my donation to Tenovus Cancer Care*
Annie	other	123	Sample Street, Sample Town	XE12 3WF	£10	24/09/21	✓

If you are able to Gift Aid your sponsorship - please give your **home address** and **don't use ditto "" marks** below as it may affect your claim.

**\*Gift Aid:** I want to Gift Aid all donations to Tenovus Cancer Care today, in the past four years, and in the future. Please notify the charity if you: Want to cancel this declaration, change your name or home address, no longer pay sufficient tax on your income and/or capital gains. If you pay Income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your Self-Assessment tax return or ask HM Revenue and Customs to adjust your tax code.

We promise to always keep your details safe and will never sell them. Sponsor's details are kept for administration purposes and to claim Gift Aid where applicable. For more details or to view our Privacy Policy please visit our website, [tenovuscancercare.org.uk](http://tenovuscancercare.org.uk).

Sponsor form

TOTAL

£.....