

Official Sponsorship Form							
Title:	Name:						
Company/Organisation (if applicable):							
Address:							
	Postcode:						
Daytime Tel:	Email:						
Event or Challenge:							
By ticking the box headed 'gift aid' you are agreeing to the following statement - I want Air Ambulance Northern Ireland to reclaim tax on my donation detailed below, given on the date shown. I confirm that 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 the difference.							

INITIALS	SURNAME	HOME ADDRESS	POSTCODE	£	GIFT AID	PAID
			GRAND TOTAL			

Air Ambulance Northern Ireland NI Registered Charity No. NIC103900 Please donate generously







INITIALS	SURNAME	HOME ADDRESS	POSTCODE	£	GIFT AID	PAID

Please return to: Air Ambulance NI, 94 Halftown Road, Lisburn, BT27 5RF. Telephone 028 9262 2677









