



Aldryngton School PTA *Try-a-Tri* 2017



Name: _____

Age: _____

Team Name: _____

Year Group: _____

Please sponsor me to compete in the Aldryngton "Try-a-Tri" on Sat 10th June 2017 in aid of Aldryngton School PTA.

If I have ticked the box headed 'Gift Aid', I confirm that I am a UK Income or Capital Gains taxpayer. I have read this statement and want the charity of Community Amateur Sports Club (CASC) to reclaim tax on the donation detailed below, given on the date shown. I understand that if I pay less Income Tax/ or Capital Gains tax in the current 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 of tax on every £1 that I have given.

Full name (First name and Surname)	Home Address (Only needed if you are Gift Aiding your donation) (Don't put your work address here)	Postcode (for Gift Aid)	Amount £	Date paid	Gift Aid? (please tick)
Total donations received (this page)			£		
Grand Total of donations received (all pages)			£		
Total Gift Aid donations			£		
Date donations given to Aldryngton School PTA					

*The Lower, Middle & Upper School children raising the most sponsorship money will be awarded prizes.
All money raised will go to support the school in accordance with the children's, PTA's and school's wishes.*

Please continue overleaf

THE DEADLINE FOR RETURNING SPONSORSHIP FORM AND PAYMENT IS MONDAY 19TH JUNE 2017 (post in the PTA Post Box located in the office foyer)



Aldryngton School PTA *Try-a-Tri 2017*



Full name (First name and surname)	Home address (Only needed if you are Gift Aiding your donation. Don't put your work address here)	Postcode (for Gift Aid)	Amount £	Date paid	Gift Aid? (please tick)
Total donations received (this page)			£		

Childs Name: _____

More sponsors? Print this page again...