SPONSORED SWIM 2024 SPONSORSHIP & GIFT AID DECLARATION FORM

Please sponsor me (child's name): _____ Class: _____

To participate in (event): Sponsored Swimming Gala

In aid of: Cottenham Primary School Parent, Teacher and Community Association



We, who have given our names and addresses below, and have ticked the box headed "Gift aid (\checkmark)", want the above named charity to reclaim tax on the donation detailed below, given on the date shown. We understand that each of us must pay an equal amount of income tax or capital gains tax at least equal to the tax reclaimed by the charity on the donation.

Full name	Home address (not work address - this is essential for Gift Aid)	Postcode	Amount per length	Total amount	Date paid	Gift aid (√)