Sponsorship Form





Charity No. 1149347 Company No. 812922

www.leeway.org.uk



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Name of Participant:

Home address: Postcode:

I am taking part in the above event to raise funds for the charities below, please help me raise as much money as possible.

Fresh Start – new beginnings a charity that provides a therapeutic service for children and young adults in Suffolk and Norfolk who have reported being sexually abused and offers support for their families.

Leeway is an independent charity with seven safe houses and a team of more than 50 people providing advice, support and information to any adult or child experiencing domestic abuse in Norfolk and Suffolk.

Fresh Start – new beginnings (FSNB) and Leeway would like to keep you up to date with news of its work and details about fundraising events and volunteering opportunities. FSNB and LWA will only contact you via the contact method(s) you indicate below in the columns marked * . Your information will be kept securely, only used by FSNB and LWA or shared with service providers who work on behalf of FSNB and LWA for its charitable purposes, and never sold, passed on unless there is a legal requirement to do so.

With GIFT AID, FSNB and Leeway can grow your donation by 25p for every £1.00 you donate! "If I have ticked the 'Giff Aid' box below, I am confirming that I wish Fresh Start – new beginnings and Lighthouse Women's Aid to claim Gift Aid on my donation. I am a UK tax payer 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. I have provided my full name, home address, and post code, as well as ticking the Gift Aid box. "

Full Name	Home Address	Post Code	Phone No. (landline/ mobile)	Email address	Amount	Gift Aid (see above)	Date Paid	AGE if U18	*EMAIL	*POST	*PHONE	Signature
My Full Name	123 The Street, Anytown	AB1 2CD	01234 567890	sampl@email.com	£10.00	$\sqrt{}$	01/07/18	14	$\sqrt{}$	$\sqrt{}$	$\sqrt{}$	Signed By Me

Please return this form, along with your sponsorship money, to: Fresh Start New Beginnings, Hannah Walker, 333 Felixstowe Rd, Ipswich IP3 9BU

If you have any queries contact Hannah@fsnb.org.uk

Office use only

(C)	Fresh	Start -	- new	beginr	nings	20	18

Name of Participant:			Event Name:			Date of Event:						
giftaid it Please remember to and if you are happy for us to contact you by email, post or phone, please tick below * (see first sheet for Gift Aid information and declaration, as well as the FSNB statement on how we will handle your information)												
Full Name	Home Address	Post Code	Phone No. (landline/ mobile)	Email address	Amount £	Gift Aid (see above)	Date Paid	AGE if U18	*EMAIL	*POST	*PHONE	Signature

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