

Sheet No …………. of ………….

**Charities which will benefit**

**from 2022 Swimathon**

TEAM NAME & No.

SWIMMER’S NAME and No.

**Eligible for Gift Aid?** We who have given our names and addresses below, and have circled **YES i**n the box, want the above charity to reclaim tax on the donation detailed below. We understand that each of us must pay an amount of Income Tax and/or Capital Gains Tax for each tax year (6th April to 5th April) that is at least equal to the amount of tax reclaimed by the charity on the donation. We understand that other taxes such as VAT and Council Tax do not qualify. We understand that the charity will receive 25p of tax on every £1 that we give.



|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Title | First Name | Last Name | House No.Name | Full Postcode | Eligible for Gift Aid? | AmountPledged | Paid |
|  |  |  |  |  | Yes/No |  |  |
|  |  |  |  |  | Yes/No |  |  |
|  |  |  |  |  | Yes/No |  |  |
|  |  |  |  |  | Yes/No |  |  |
|  |  |  |  |  | Yes/No |  |  |
|  |  |  |  |  | Yes/No |  |  |
|  |  |  |  |  | Yes/No |  |  |
|  |  |  |  |  | Yes/No |  |  |
|  |  |  |  |  | Yes/No |  |  |
|  |  |  |  |  | Yes/No |  |  |
|  |  |  |  |  | Yes/No |  |  |
|  |  |  |  |  | Yes/No |  |  |
|  |  |  |  |  | Yes/No |  |  |
|  |  |  |  |  | Yes/No |  |  |
|  |  |  |  |  | Yes/No |  |  |
|  |  |  |  |  | Yes/No |  |  |
| Have you also used JustGiving? Yes/No |  |  |  |  | Sheet Total |  |  |

Cheques payable to RC MK Swimathon