Society for Mucopolysaccharide Diseases
MPS House, Repton Place
White Lion Road, Amersham
Buckinghamshire, HP7 9LP, UK

0345 389 9901
mps@mpssociety.org.uk
www.mpssociety.org.uk

SPONSORSHIP FORM

Full name:	I am being sponsored to:
Full home address:	In aid of: Society for Mucopolysaccharide Diseases
	On (date):
	At (place of event):
Postcode:	Event organiser's name:
Age (if under 18):	Event organiser's address:

Please note: The MPS Society is not responsible for the organisation of this event or for the collection of the money, but we are delighted that such an effort is being made on our behalf.

If I have ticked 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 named above 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 tax 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.

Remember: You must provide your full name, home address, postcode & tick the Gift Aid box for the charity to claim tax back on your donation

Name	Home address including house name and number	Postcode	Amount sponsored	Amount received	Gift Aid	Date

Monies received by the MPS Society go towards supporting those affected by MPS and related diseases throughout the UK.

Please ensure that you complete your full name, home address and postcode(these details will not be used by the MPS Society to contact you). Please keep this form safe. We will need you to return it to us to claim Gift Aid.If you don't have enough sponsorship forms, please photocopy this one. Don't forget that you can always visit **www.justgiving.com** and create your own personalised web page.

The MPS Society takes its responsibilities in relation to data protection very seriously. Details on this form will be stored, recorded and shared in accordance with GDPR. Further information can be found in our Data Protection and Privacy Policy (https://www.mpssociety.org.uk/policies)

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