

SPONSORSHIP PLEDGE FORM

Please enter relevant information in all sections

I will sponsor:

SCHOOL FEES

Yes

..... Pupils at £18 a month. Total £ per month

KEY TEACHERS

Yes

..... Teachers at £150 a month. Total £ per month

I will contribute to the **Small Projects Fund**

Yes

By paying either £ a month or a sum of £ as a one-off contribution

I hereby enclose a cheque for £ as a single contribution to the Trust Yes

I have completed the Banker's Order form below and it is ready to be sent to my bank for the **Cambridge Nazareth Trust** to receive on the 15th day of the next month and hereafter:

Yes

EITHER Annually on 15th May, the sum of £.....

OR on the 15th day of each month the sum of £.....

Reference number..... *(This will be added by the Trust)*

Bankers Order Form

To the Manager Bank Plc

This order is additional to any existing order in favour of the same payee (Delete if inapplicable)

Address of your Bank

.....
.....
.....

Post Code

Pay to: **Girobank plc** Sort code: **72 00 02**

for a/c **Cambridge Nazareth Trust** Account No. **8 299 4505**

on the 15th day of the next month and hereafter:

EITHER Annually on 15th May, the sum of £.....
until further notice.

OR on the 15th day of each month the sum of £.....
until further notice.

From my Account No Sort Code

Your name

Your address

.....
.....
.....

Post Code

Telephone Fax

Signature Date...../...../.....

*Please complete the details on this form and send it to **CNT** with your pledge form*

Gift Aid Declaration

I want * do not want The **Cambridge Nazareth Trust** to treat this and all future contributions as GIFT AID donations. *(This declaration enables the Trust to recover the standard rate tax you have paid on the donated amount)*

I understand that I must be paying an amount of income tax and/or capital gains tax at least equal to the tax that the Charity reclaims on my donations (currently 28 pence for each pound you give). You can cancel this declaration at any time. If, in the future, you do not pay tax equal to that which is claimed then you should cancel this declaration. If you pay tax at the higher rate, you can claim further tax relief in your Self Assessment Tax Return.

Please notify the Trust if you change your name or address.

*Name

*Address

.....

.....

.....

*Post Code

Telephone Fax

Email

I am representing: Self / Group / Parish / School / Company

Organisation name.....

(if applicable)

Signature Date...../...../.....

Please return this declaration to:

The Treasurer

Cambridge Nazareth Trust

10 West End

Wilburton

Cambs CB6 3RE

Registered Charity Number 289084

* This information is required for your Gift Aid Declaration to be effective.