MISCARRIAGE ASSOCIATION
The knowledge to help

Memory Walk

**2 Otters Holt, Durkar, Wakefield, WF4 3QE**
**Tel: 01924 200799 Charity Number: 1076829 SC039790**
**www.miscarriageassociation.org.uk**

Miscarriage can be a very distressing, frightening and lonely experience. The Miscarriage Association is a national charity providing support and information to anyone who is affected by the loss of a baby in pregnancy. We work with health professionals to promote good care and support research into the causes and treatment of miscarriage. Your sponsorship money will help fund our helpline, a national network of support volunteers, and a wide range of leaflets on the facts and feelings of pregnancy loss.

**Please return this form to the above address or email to Fundraising@miscarriageassociation.org.uk**

## Make your sponsorship worth more... giftaid it

**For every pound you donate, we get an extra 25 pence from the Government if you qualify. Just read the declaration below and follow the simple instructions re your address and the tick box. Your address will not be used for any purpose other than claiming Gift Aid.**

**Declaration by the sponsor:** If I have ticked the 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 to reclaim tax on the donation detailed below, given on the date shown. I understand that I must pay an amount of Income Tax and/or Capital Gains Tax in the tax year at least equal to the amount of tax that all the charities and Community Amateur Sports Clubs I donate to, will reclaim on my gifts for that tax year. I understand that other taxes such as VAT and Council Tax do not qualify. I understand that the charity will reclaim 25p of tax on every £1 that I have given.

Please sponsor _____who is participating in our Memory Walk during Baby Loss Awareness week to raise funds and awareness for the Miscarriage Association.

| Full Name (First name & surname) | **HOME** Address Required If ticking Gift Aid | **HOME** Postcode Required If ticking Gift Aid | Amount £ | Date Paid | Gift Aid? √ |
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| CHARITY USE ONLY | | |
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| | **Total donations received >** | **£** |
| | **Total Gift Aid donations >** | **£** |
| | **Date donations given to Charity >** | |

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Please sponsor who is participating in the Memory Walk as part of our Baby Loss Awareness week campaign to raise funds and awareness for the Miscarriage.

| Full Name (First name & surname) | **HOME** Address Required If ticking Gift Aid | **HOME** Postcode Required If ticking Gift Aid | Amount £ | Date Paid | Gift Aid? √ |
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| | **Total donations received >** | **£** |
| | **Total Gift Aid donations >** | **£** |
| | **Date donations given to Charity >** | |