



President: The Earl of Pembroke



# Sponsor Form

## Making a difference for patients at Salisbury District Hospital

The Stars Appeal raises money to help local people being treated in all wards and departments at Salisbury District Hospital.

**Please help me to raise as much money as possible for the Stars Appeal by sponsoring me below**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ Tel No: \_\_\_\_\_

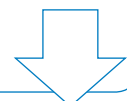
### I wish to direct my donation as follows:

- |   |  |
|---|--|
| <input type="checkbox"/> Wherever the need is greatest  | <input type="checkbox"/> Cancer Care           |
| <input type="checkbox"/> Children (Caring 4 Kids)   | <input type="checkbox"/> Cardiac Care          |
| <input type="checkbox"/> NICU/Special Care for Babies (Little Lives Fund)   | <input type="checkbox"/> Stroke Care           |
| <input type="checkbox"/> A specific ward, department or fund at Salisbury District Hospital please state below<br>e.g. Radnor ICU, Burns Unit, Pembroke Unit, Spinal Unit, Downton Ward, Britford Ward, Breast Care, Stroke Unit. | <input type="checkbox"/> Elderly Care          |
| _____   | <input type="checkbox"/> Precious Moments Fund |

### Gift Aid:

\*The Stars Appeal can claim 25% extra on each sponsorship donation, without it costing you a penny extra, through the Gift Aid Scheme. By ticking the box you confirm the following: I confirm that I am a UK Income or Capital Gains taxpayer. I have read this statement and want the Stars Appeal 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 CASCs 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 the charity will reclaim 25p of tax on every £1 that I have given.

*giftaid it*



Full Name (first name and surname) Required for Gift Aid	Home Address Required for Gift Aid	Postcode Required for Gift Aid	Amount	Date Given Required for Gift Aid	Gift Aid* Tick Here

Set up an online sponsor form at [www.justgiving.com/salisburyhc](http://www.justgiving.com/salisburyhc)  
Download and print off more sponsor forms at [www.starsappeal.org](http://www.starsappeal.org)

Sub Total: £

PLEASE  
TURN OVER

