

## Sponsor Form

Please sponsor me to 'Walk for Pembroke' on Saturday 13th April 2024 in aid of The Pembroke Centre.

Walkers Details:							
Title: F	_ Forename: Surname:						
Address:							
Postcode:		Tel No:					
Entry Fee £10/adult £5/child (under 5's free)  No. Adult Walkers:  No. Child walkers:  No. Walkers under 5years:  Entry Fees Due, Total: £		— Avon rout — Wilton ro	I/we walked the:  Avon route - 1 mile  Wilton route - 1.5 miles  Pembroke route - 2 Miles				
this statement and want the detailed below, given on the year than the amount of G	d the box headed 'Gift Aid, I he charity or Community Ama le date shown. I understand t ift Aid claimed on all of my d p of tax on every £1 that I h	teur Sports Club (CASC hat if I pay less Income onations it is my respons	) named above t : Tax / or Capito	o reclaim tax on the al Gains tax in the cu	donation rrent tax		
Full name Required for Gift Aid	Home Address Required for Gift Aid	Post Code Required for Gift Aid	Amount	Date Given Required for Gift Aid	Gift Aic Tick Here		

Please forward your sponsorship money to:

You can pay by BACS, please use reference 'your name': Wilton Riding School for the Disabled Association

Sort Code: 40-43-03

Account Number: 52251590

You can also submit your donations through the Just Giving page. Please reference Walk for Pembroke.

https://www.justgiving.com/wilton-rda



Tel: 01722 744822

Email: pembrokecentre@gmail.com

Thank You

I have raised a total of £.

To be completed by The Pembroke Centre

Date Entry fees received:

Date Sponsorship received:

Gift Aid eligible Amount: £