

SPONSORSHIP FORM

1. YOUR DETAILS

NAME:

ADDRESS:

E-MAIL:

TEL NO:

1. YOUR OPTIONS

I WANT TO SPONSOR AND SUPPORT A CHILD FOR £15.00 A MONTH

I WANT TO SPONSOR AND SUPPORT A YOUNG PERSON FOR £25.00 A MONTH

1. STANDING ORDER

I would like to make a monthly contribution of £ starting from the / / (date) & on the same day each month thereafter until counter demanded by me.

Name(s) of account holder(s):

Bank / Building Society account no:

Sort code:

Name & full address of your Bank or Building Society:

Signature:

Date:

TO: Barclays Bank A/c name: Ubaka U Rwanda A/c no: 13571440 Sort code: 20-67-90

Do you pay tax? If yes then you can add over 25% to the value of your gifts to Ubaka U Rwanda at no extra cost to you. Simply tick and date the **Gift Aid** declaration below:

giftaid it

I want Ubaka U Rwanda to treat this donation and any further donations, as Gift Aid donations until further notice. Date: / / .

RETURN TO:

Please do not send this to your bank. Return it to the treasurer who will forward it to your bank for you: Ubaka U Rwanda, 1 Dean Court, Brook Avenue, Edgware, HA8 9BX