School Sponsorship Form

Name: Event: Date:

Please sponsor me to help raise funds for our linked school in Africa.

Name	Address	Postcode	Amount	Gift Aid*	Do not mail**	Email Address	Amount received	Date collected

Please make cheques payable to African Revival

*Gift Aid: if you would like your donation to be increased by 28% by allowing African Revival to claim the tax on this donation please tick the gift aid box.

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