

**Sponsorship Form**

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| **Name of Participant:**  **Contact Details:** | **Event:**  **Date:** |

**Gift Aid:** Please consider Gift Aid to make your donation worth 25% more.

(Please note, you must be a taxpayer paying more tax than the amount we reclaim in order for us to claim Gift Aid from your sponsorship)

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| **Name** | **Address**  **(Please provide your postcode**  **which is essential for Gift Aid)** 🡪 | **Postcode** | **Amount** | **Gift Aid**  **(Please**  **Tick)** ✓ | **Tick if**  **Paid** ✓ |
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**On behalf of CUREUsher, thank you so much for your help and contributions.**

**Funds raised will go towards research into Usher syndrome which is the leading cause of genetically inherited combined hearing and sight loss.**