42nd HIGHLAND CROSS 2026 Kintail - Affric - Beauly

Name of Competitor:

Competitor No:

Sheet no. ---------- of ---------- sheets

GIFT AID - If I have ticked the box marked " **Gift Aid ✔**", I confirm that I am a UK Income or Capital Gains taxpayer. I have read this statement and want Highland Cross 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 reclain 25p of tax on every £1 that I have given. (Charity No. SCO26679)

SPONSORSHIP & GIFT AID DECLARATION FORM

HIGHLAND CROSS - 20th JUNE 2026

PRINCIPAL CHARITIES BEING ASSISTED IN 2026

more details available on **www.highlandcross.co.uk**

DUNDONNELL MOUNTAIN RESCUE TEAM
Help to purchase a 4 x 4 vehicle

GLENURQUHART CARE PROJECT
Help to purchase a vehicle

ISOBEL FRASER CARE HOME
Help to purchase a minibus

SKYE & LOCHALSH YOUNG CARERS
Help to purchase a minibus

OFFICE USE ONLY	Sponsor´s Full Name (FIRST NAME & SURNAME - BLOCK CAPITALS PLEASE)	Sponsor´s Home Address (ONLY NEEDED IF YOU ARE GIFT AIDING YOUR DONATION - DON´T GIVE YOUR WORK ADDRESS IF YOU ARE GIFT AIDING YOUR DONATION)	Postcode	Donation Amount £	Gift Aid? ✔	Date Paid
	JOHN SMITH	19 CULDUTHEL ROAD, INVERNESS	IV2 4AA	10.00	✔	

Alternatively, use the JUSTGIVING (www.justgiving.com) website and select "Highland Cross" to set up your own page.

brought forward from previous sheet (if applicable) £

Total collected OR amount carried forward to next sheet £

Total Sum Handed Over £:	**Competitor´s Signature:**	**Date:**

OFFICE USE ONLY	First Name & Surname (BLOCK CAPITALS PLEASE)	Home Address	Postcode	Amount	Gift Aid? ✔	Date Paid
	JOHN SMITH	19 CULDUTHEL ROAD, INVERNESS	IV2 4AA	10.00	✔	

brought forward from previous sheet (if applicable) £

Total collected OR amount carried forward to next sheet £

Total Sum Handed Over £:	Competitor´s Signature:	Date: