## **Sponsorship Form**

## Name of participant:

## Enid Vincent – WING WALK

## FOR PROSTATE CANCER

Image: series of the series	Name	Address	<b>Postcode</b> (essential for Gift Aid)	Amount	<b>Gift Aid</b> (please tick)	Tick if Paid
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Bank Details for donations: Sort Code 09 00 00 : Account No 00050005 : Reg (must be included) R25918756VIN

Thank You for Your Help and Contributions