**SPONSORSHIP FORM**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of participant** | **……………………………………** |  | **Telephone Number……………………..** |  |

Dear Potential Sponsor

I am participating in the Sight Matters Coast 2 Coast walk on Sunday 3rd September 2023

All proceeds will help visually impaired people living in the Isle of Man. Please make cheques payable to Sight Matters

Thank you!

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of sponsor** | **Address of sponsor** | **Amount pledged** | **Amount collected** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  | **TOTAL** |  |

 **PLEASE SEND ALL MONIES TO SIGHT MATTERS, CORRIN COURT, HEYWOOD AVENUE, ONCHAN, ISLE OF MAN IM3 3AP**

[www.sightmatters.im](http://www.mbws.org.im)

Sight Matters is a trading name under Manx Blind Welfare Society

Manx Registered Charity No 132