

SPONSOR A CLASS – EDUCATIONAL KIT – APPLICATION FORM

Date: _____

Contact name: _____
(first) _____ (family) _____

Organisation: _____

Address: _____

City/Town: _____ Post Code: _____

Office Tel No: _____

Mobile No: _____

Email: _____ Other: _____

Project Name: _____

Details of Local Authority

Reference name: _____
(first) _____ (family) _____

Address: _____

City/Town: _____ Post Code: _____

Office Tel No: _____

Mobile No: _____

Email: _____

Relationship: _____

Number of Kits requested

Applicant Notes

Please insert any additional information you consider relevant (Please use an additional sheet if necessary)

Notes: Please read carefully

- A. Please complete this application form using block capitals and black ink.
- B. The information provided in this form will not be disclosed to third parties except in the interest of safety.
- C. You should complete this form as thoroughly as possible.
- D. The form should be completed so it is legible otherwise it may be rejected.
- E. Completion and entry of this form does not guarantee approval or acceptance to receive free Kits.
- F. a. Scan the completed form and email it to contact@sponsoraclass.co.uk, or
b. Fax the completed form to: 020 8458 0099, or
c. By mail to Sponsor a class, Suite 14, 120 West Heath Road, London NW3 7TU

SAC Internal use only

Info Checked by
Result

Accepted

Date: _____
Rejected