**10X Challenge - IOU**

I (NAME) acknowledge receipt of £10 paid to me by (ORGANISATION NAME) for use to participate in 10X Challenge 2025 only.

* I understand that if I make a profit I must repay £10.00 in full, plus £1 legacy contribution by (DATE) to (ORGANISATION NAME)
* I understand that if I do not make a profit I will repay at least £8.00 by (DATE) to (ORGANISATION NAME)

**Signature of student**………………………………………………………………………

**Name** (please print)…………………………………………………………………………

**Date**…………………………………………………

**Signature of parent/guardian**……………………………………………………………..

**Name** (please print)…………………………………………………………………………..

**Date**…………………………………………………

**Signature** ……………………………………………………………………………………..

**On behalf of (ORGANISATION)** ……………………………………………………………

**Date**…………………………………………………