

## Membership Application

### YOUR DETAILS

|                            |         |
|----------------------------|---------|
| Name: Mr/Mrs/Ms/Miss/Other |         |
| Email: **                  |         |
| Address:                   |         |
|                            |         |
| Post Code:                 |         |
| Telephone:                 | Mobile: |

### MEMBERSHIP FEES

|   |  |
|---|--|
| <input type="checkbox"/> One member: £15 from 1st January.  |  |
| <p>These fees include a £4.00 membership fee paid to our national organisation, the Third Age Trust, which provides a wide range of services and benefits, including liability insurance cover.</p> <p>If you are a paid up member of another u3a then you only pay £11.00.</p> <p><b>N.B.</b> Please state which other u3a you are a paid member of:</p> <p><b>N.B.</b> Have you previously been a member of Cestria u3a Yes/ No</p> <p>Membership fees are payable by:</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Bank Transfer to:<br/>           HSBC<br/>           Sort Code: 40-17-41<br/>           Account No: 31408291<br/>           Account Name: Cestria U3A at Chester-le-Street         </div> <div style="width: 45%;"> <input type="checkbox"/> Cheque made payable to 'Cestria at Chester-le-Street U3A'<br/><br/> <input type="checkbox"/> Cash. Only for new member joining at the Monthly Meeting         </div> </div> |  |

### TERMS AND CONDITIONS OF MEMBERSHIP

All members must:

- Abide by the Principles of the u3a movement and by Member Code of Conduct.
- Always act in the best interests of the u3a and never do anything to bring the u3a into disrepute.
- Abide by the terms and conditions of the constitution.
- Treat fellow members with respect and courtesy at all times.
- Comply with and support the decisions of the elected committee.
- Advise the committee of any change in your personal details.

I'm applying for membership of Cestria at Chester-le-Street u3a and confirm that I will abide by the terms of membership as stated above. I confirm that I have completed the form myself or have been assisted to do so.

Signed

Dated

## PRIVACY STATEMENT

Cestria at Chester-le-Street u3a processes member information so that we can keep you informed about events, groups and activities as part of your membership. Cestria at Chester-le-Street u3a's lawful basis for collecting this information is legitimate interest. In processing your information Cestria at Chester-le-Street u3a will:

- Store it securely.
- Use it to communicate with you as a u3a member.
- Share your information with group leaders/convenors for those groups that you are a member of.
- Send you general information about the Third Age Trust\*.

\*The Third Age Trust is the national office to which all U3As are affiliated.

*As part of your membership you will be sent the Third Age Trust publication – Third Age Matters.*

*Are you happy to be added to the direct mailing list for the Third Age Trust magazine – Third Age Matters If so, please tick the box below:*

☐ *I consent to my data being shared with the company who oversee the distribution of the Trust Magazines.*

*If you **do not** wish to receive the magazine please tick the box below.*

☐ *I do not wish to receive the Third Age Trust publication..*

**For internal use:**

| Received | Paid | Logged | Membership Number |
|----------|------|--------|-------------------|
|          |      |        |                   |

## OPTIONAL INFORMATION

Cestria at Chester-le-Street u3a relies on its members to provide next of kin information and to make the individual aware that this information has been passed to the u3a and for what purposes it has been given. Cestria at Chester-le-Street u3a will hold this information securely and it will only be accessed by those who need to see it. The information provided will only be used to contact the next of kin where an incident or accident occurs that requires someone to take responsibility for the member in question. The data will not be processed for any other purposes.

### Next of Kin Emergency Contact Details

Name: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Telephone/Mobile Number: \_\_\_\_\_

Would you be willing to volunteer to help Cestria U3A committee? Yes/No

Where did you hear about Cestria at Chester-le-Street u3a? \_\_\_\_\_