



Chelmsford Membership Application
Form 1st March-28th Feb

There are 2 types of membership, full and affiliated. Affiliated membership is open to full members of other u3a's. Part-year membership is available for those joining on or after 1st October, one fee for all.

Full Member (£12) Member No (for office use)

Affiliated member (£8) for full members of another u3a Parent u3a name/Membership No.....

Part-Year (£7.50)

Payment can be made by bank transfer, or by cheque or cash at the monthly membership meeting.
 Bank Details: U3A Chelmsford. Sort Code 40-10-27 Account No 41153684 Reference; Your Name and NM for new Members.

Please send the form to chelmsfordu3amembership@gmail.com or post to New Members Secretary, 56 Hillside Grove, Chelmsford, CM2 9DB.

If you need to pay by cheque please make it payable to 'U3A Chelmsford', and send with completed form.
 Bank transfer.. Cheque.. Cash..

Title.....Forename.....Surname.....

Email Address.....

Postal Address.....

Post Code..... Telephone.....

Please read the **privacy statement below**. If you agree that the personal information that you have supplied can be used for the purposes stated then please sign the statement.

PRIVACY STATEMENT

We undertake to keep your data secure and not to pass it on to any outside organisation except to fulfil our obligations to you as a member. We will use your data only for the following purposes:

Please tick the box if you agree to us using your data for the following purposes

- To send you official communications as a member of Chelmsford u3a
- To share with committee members and group leaders only as required to enable you to participate in u3a activities.
- To share with the companies who oversee the distribution of the Third Age Trust magazines- Third Age Matters, Sources and Chelmsford u3a Newsletter

Signature (Print if sending electronically)..... Date.....

Charity Gift Aid Declaration Charity No. 1027234

I wish to Gift Aid my Subscription of £..... I would like Chelmsford u3a to reclaim the tax on this and any other eligible donations or membership subscriptions that I may make in the future until further notice. I understand that I need to pay enough Income Tax or Capital Gains Tax in each tax year to cover the Gift Aid claimed on all my donations to charity, otherwise it is my responsibility to pay any difference.

Title Forename..... Surname Membership No

Address..... Post Code.....

Date

Please notify the Membership Secretary if you want to cancel this declaration.