

## YOUR DETAILS

## MEMBERSHIP APPLICATION FORM

### Member 1

Title: (Print)	Name:	Mobile:
Email*	Home Telephone:	
Address:		
Post Code:		

### Member 2 – delete if not applicable

Title: (Print)	Name:	Mobile:
Email*		

\* To reduce costs, the committee will communicate with you via email where possible

Are you a member of another U3A group? <b>YES/NO</b> (Delete as applicable) If YES which U3A do you belong to:
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Emergency Contact (If your partner is also a member please give an alternative emergency contact)

Name:
Telephone: Relationship:

## MEMBERSHIP FEES PAYMENT

Cheques should be made payable to: **Isle of Sheppey U3A**

Bank Transfer can be made to: **Account Number: 33003361 Sort Code: 20-54-25 Reference: Your Name**

## PRIVACY STATEMENT

1. Isle of Sheppey U3A requires members to provide their personal information so that you can be kept informed about events and activities that are offered as part of your membership. In collecting your information Isle of Sheppey U3A will:
  - Store it securely for membership purposes
  - Use it to communicate with you as a U3A member
  - Share it with group leaders for those groups that you are a member of
  - Send you general information about the Third Age Trust (the national organisation to which U3As are affiliated)
2. In order to receive the quarterly Trust Magazine – Third Age Matters and Sources, Isle of Sheppey U3A need to share your address details with the company who manage the distribution.

If you wish to receive the magazine and accept these terms please tick this box

Applicants should note that they may be included in member's photographs that may from time to time be used in the Isle of Sheppey newsletter and on the Isle of Sheppey U3A website. If you have any objection to this, please notify the Membership Secretary.

Signature: (Member 1)	Date:
Signature: (Member 2 if applicable)	Date:

NB If you have any queries regarding the use of your personal information please contact the Membership Secretary.

## GIFT AID YOUR MEMBERSHIP FEE

Are you a UK tax payer? If the answer is yes you could boost your subscription by 25p of Gift Aid for every £1 you pay. Gift Aid is reclaimed by Isle of Sheppey U3A from the tax you pay for the current tax year. Your address is needed to identify you as a current UK taxpayer. If you choose to donate Gift aid your details will be shared with HMRC.

In order to Gift Aid your donation you must tick the box below:

I want to gift Aid my donation and any donations I make in future to:

Name of Charity: **Isle of Sheppey U3A**

I am a UK Taxpayer and understand that if I pay less income tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibilities to pay any difference.

**My Details** Title \_\_\_\_\_ First Name \_\_\_\_\_ Surname \_\_\_\_\_

Home address \_\_\_\_\_

\_\_\_\_\_ Post Code \_\_\_\_\_ Date \_\_\_\_\_

Please notify the charity if you:

- wish to cancel this declaration
- change your name or home address
- no longer pay sufficient tax on your income and/or capital gains

If you pay Income Tax at the higher or additional rate and want to receive additional tax relief due to you, you must include all your Gift Aid donations on your Self-Assessment tax return or ask HM Revenue and Customs to adjust your tax code.

NB: One copy of this form is required for each individual wishing to Gift Aid their subscription. If you are completing a joint membership application form and both applicants wish to Gift Aid their subscriptions you will both need to complete separate copies. Joint declarations will not be accepted by HM Revenue and Customs.

FOR INTERNAL USE

RECEIVED	PAID	LOGGED	MEMBERSHIP NUMBER:
MEMBERSHIP CARD PREPARED			CARD ISSUED
DATABASE MEMBERSHIP COMPLETE	DISTRIBUTION	TAM	REGISTER

### RECEIPT – PLEASE COMPLETE YOUR DETAILS

Name: (Print)	Amount Paid: Cash/Cheque/Bank Transfer/Card
Name: (Print)	Amount Paid: Cash/Cheque/Bank Transfer/Card

ISLE OF SHEPPEY U3A	
Received by: (Print)	Signature: