

The overall ethos of the u3a is one of mutual learning. The aim of the u3a movement is for all members to contribute, in as many ways, as possible, to the success of the movement. Please get involved and make a difference!

MEMBERSHIP APPLICATION FORM

Please return to the Membership Secretary at <u>u3a.ross.membership@gmail.com</u>

or

12 Woodmeadow Road, Ross-on-Wye HR95QG

Membership options and fees:

Individual - £16 for full year (1 April- 31 March) or £10 for part year (1 October - 31 March)

Joint (for two people at the same address) - £27 for full year (1 April- 31 March) or £17 for part year (1 October - 31 March)

Associate - For members of other uʒas, who wish to participate in Ross uʒa activities. Please contact the Membership Secretary <u>u3a.ross.membership@gmail.com</u> for details.

Member details	for Individual or First joint	member. Please PRINT details.
Title Fir	st Name	Last Name
Known as		
Address		
Postcode	Mobile No	Landline No
Email Address _		
u3a member, and	d shared with group coordinators	rill be stored securely, used to communicate with you as a s of any interest groups that you join. embership and Gift Aid (if applicable) purposes.
Signed		Date
Special consid activity?	erations – Is there anything yo	u wish to make us aware of in relation to accessing a u3a
In Case of Emergaccident or health		etails of the person we should contact in the event of an
Name	Rel	ationship to you
Mobile		Landline
Do you wish to re	ceive the Third Age Matters mag	gazine (included in membership fee)? YES/NO
Are you intereste	d in working with committee mer	mbers to support of u3a? YES/NO

Member details for Second joint member. Please PRINT details.		
Title First Name Last Name		
Known as		
Mobile No Landline No		
Email Address		
Privacy Statement - The data provided by you will be stored securely, used to communicate with you as a uʒa member, and shared with group coordinators of any interest groups that you join. I consent to my data being stored and used for membership and Gift Aid (if applicable) purposes.		
igned Date		
Special considerations – Is there anything you wish to make us aware of in relation to accessing a u3a activity?		
In Case of Emergency (ICE) - Please provide details of the person we should contact in the event of an accident or health problems.		
Name Relationship to you		
Mobile Landline		
Are you interested in working with committee members to support of u3a? YES/NO		
Payment details. Please note that bank transfer is our preferred payment method		
Amount paid Payment Option		
By BACS payable to: Ross & District u3a, Sort Code 54-30-51, Account No. 19424728. Please use your full name as the reference		
By cheque made payable to: Ross & District u3a		
Gift Aid: Please sign this declaration if you can. It will increase the value of your donation at no extra cost to you and will give us valuable additional income. If you pay income tax or capital gains tax, Gift Aid can be claimed from HMRC at a rate of 25p for every £1. Only one of joint member should sign. I confirm that I am a UK taxpayer and would like Ross & District u3a to claim the Gift Aid for past, present and future donations, and that I pay the same amount or more of UK tax as all charities will claim on my gifts in a tax year and that I am responsible to pay any difference. I am a UK taxpayer and I understand it is my responsibility to advise Ross & District u3a if my tax		
position, name or address change.		