

Membership Number

(to be completed by the Membership Secretary)

MEMBERSHIP APPLICATION FORM for Washington Village u3a (Charity Reg No 1179094)				
PERSONAL DETAILS - PLEASE PRINT				
tle & Full Name: Familiar name:				
Address:				
Postcode:				
Telephone: Mobile:				
Email Address:				
Emergency Contact Name and phone number:				
N.B. To save costs, the committee and group leaders will use email whenever possible				
MEMBERSHIP FEES				
The membership year of <i>Washington Village u3a</i> is 1st April to 31st March. Annual Membership is £15. This includes fees to our national organisation, <i>The Third Age Trust</i> , which provides a wide range of services and benefits, including liability insurance cover, and a copy of <i>Third Age Matters</i> magazine five times a year. Associate membership is available for fully paid-up members of another u3a; you only need to pay £11 (please state your main u3a and membership number:				
If you are applying during October to March, the fee is: £10.00 (£6 for Associate members).				
TERMS AND CONDITIONS OF MEMBERSHIP				
All members must: 1. Abide by the Aims and Guiding Principles of the u3a movement. 2. Always act in the best interests of the u3a and never do anything to bring the u3a into disrepute. 3. Abide by the terms and conditions of the constitution. 4. Treat fellow members with respect and courtesy at all times. 5. Comply with and support the decisions of the elected committee. 6. Advise the committee of any change in your personal details.				
I agree that any photographs of me taken at u3a events may be published on the u3a website. Please tick the appropriate box: YES NO				
I apply for membership of <i>Washington Village u3a</i> and confirm that: I will comply with the terms and conditions of membership as stated above I have completed the form myself I will pay my membership fee either by bank transfer (sort code 309950 (Lloyds), acc no. 30889762) or by cheque payable to <i>Washington Village u3a</i> or by cash By signing this form I agree to have my personal details held on our secure database to be used solely for the purposes of administration and the communication of u3a matters. 				
Signature: Date: Please tick this box if you are you able and willing to Gift Aid your annual membership fee (at no extra cost)				
Please indicate overleaf if you are able to help with: leading an activity or short course, giving a talk, administrative support, organising events, ideas for new interest groups. Please hand this form to the Membership Secretary at the earliest monthly meeting.				
Where did you hear about us? (Please ✓) Word of mouth Search Engine Website News Advert Social media (Facebook, Twitter, Instagram) Other				