



MEMBERSHIP APPLICATION FORM
ANNUAL SUBSCRIPTIONS 1 MAY TO 30 APRIL

Those joining January to April will be paid up until April the following year.

RATES: £10 per person; £15 for two people living at the same address

NAME(S)

DATA PROTECTION

.....
.....

Please sign below to confirm that you agree to your personal information being held electronically by designated officers of the Trust and that we can use this to contact you. The information will not be used for any purposes other than your membership and will not be disclosed to any third party.

ADDRESS

.....
.....
.....

POSTCODE.....

TELEPHONE.....

EMAIL:

.....

Signed.....
Date.....

*Payment can be made by bank transfer to: Lloyds Bank
Sort code: 30-98-90
Account: 15393060*

Membership Secretary,
Birchington Heritage Trust,
Burley Gallery,
Birchington Library, Alpha Road,
Birchington, Kent CT7 9EG

OR by sending a cheque to the address opposite (payable to Birchington Heritage Trust)

If you would like to set up a Standing Order please ask for the form

OR by cash/cheque in person at the museum

If you are a UK taxpayer please see overleaf.



GIFT AID DECLARATION

Charity No. 1099250

HMRC Ref. XT3592

One taxpayer only to fill in this form

TITLE.....

FORENAME (in full)

.....

SURNAME.....

ADDRESS

.....

.....

.....

POSTCODE.....

***Please treat as Gift Aid
donations all qualifying gifts of
money made to Birchingdon
Heritage Trust***

Today

In the future

Please tick the box you wish to apply.

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 responsibility to pay any difference.

Signed.....

Date.....

Please notify us if you:

- > Want to cancel this declaration
- > Change your name or home address
- > No longer pay sufficient tax on your income and/or capital gains