| foasd Membership Application |
| --- |
| Applicant Information |
| Title (Dr/Mr/Mrs etc): |
| Name: |
| Address: |
|  |
| Post code: | Telephone: | Email: |
| membership category (circle & Total) |
| Adult (individual) | £20 |  | Corporate | £200 |
| Junior (under 18) | £10 | Life | £300 |
| Joint Adult (at same address) | £30 | Joint Life (at same address) | £500 |
|  |  | **Total:** |  |
| payment |
| Cheque/Bank Order: Payable to FOASD |
| BACS Transfer: Account: 02613299 Sort: 30-93-32 |
| Signatures |
| Signature of applicant: | Date: |
| **If you are a UK taxpayer, please sign the following Gift Aid declaration to enable the FOASD to claim a tax refund – *without cost or further obligation to you.*** |
| I would like the Friends of All Saints’ Dogmersfield to reclaim tax on all my donations until further notice. I understand that I must pay UK income and/or capital gains tax at least equal to the tax reclaimed from my donation.Signed: Date:  |
| Please return this form to:**Membership Secretary, FOASD****DogmersfieldFriends@gmail.com** |