

Friends Membership Application Form

Please tick this box if you are renewing your membership

I would like to apply for the following membership:

- £26.50 Single 1 designated adult
- £47.00 Joint 2 designated adults
- £50.00 Family 1 adult 1 designated adult + up to 4 children
- £65.00 Family 2 designated adults + up to 4 children



Personal details

Full name

Mr/Mrs/Ms/Miss/other

Name of Joint Member (if applicable).....

Postal address

.....
.....

Post code

Telephone

Email

For return address and payment methods please see overleaf

We would like to keep you up to date about what is happening in Rococo Garden. We send out a bi-annual newsletter by post and a monthly newsletter by email. Please tick the relevant boxes if you are happy to hear from us by:

Email: Yes No

Post: Yes No

We will store your personal data securely in accordance with current legislation and we will never sell or give them to a third party

Signed: Date:

Gift Aid Declaration

Please treat as Gift Aid donations all qualifying gifts of money made

Today In the Future

I confirm I have paid or will pay an amount of Income Tax and/or Capital Gains Tax for each tax year (6 Apr to 5 Apr) that is at least equal to the amount of tax that all the charities or Community Amateur Sports Clubs that I donate to will reclaim on my gifts for that tax year

Signature

Date

Please notify us if you (i) wish to cancel this declaration: (ii) Change name or address: (iii) No longer pay sufficient tax on your income and/or capital gains.

Contact details

Please return this form to:
Friends of Painswick Rococo Garden
Painswick Rococo Garden
Gloucester Road
Painswick
GL6 6TH

Or send it by email to:
friends@rococogarden.org.uk
Office phone number: 01452 813204

Payment methods

- Set up a Direct Debit (see below)
- Send us a cheque made payable to 'Friends of Rococo Garden'
- Pay at the till on your next visit
- Call us to make a payment over the phone
- Pay by BACS to "The Friends of Painswick Rococo Garden"
Account number 00337721
Sort code 30-98-29

Direct Debit Details

I am paying £ _____ per year starting on the 8th/22nd* of next month. Payments will continue until further notice or until you advise your bank or us otherwise. (**please delete as appropriate*)

Instruction to your bank or building society to pay by Direct Debit

To: The Manager	Bank/building society
Address	

Postcode	

Service User Number: 277937



Reference

Instruction to your bank or building society: Please pay CTT Charity Payments Ltd Direct Debits, from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with CTT Charity Payments Ltd and, if so, details will be passed electronically to my Bank/Building Society.

Name(s) of account holder(s)

Signature(s)

Date: DD / MM / YY

Branch Sort Code
 - -

Bank/building society account number

Banks and building societies may not accept Direct Debit instructions for some types of account