



The subscription is £6 per person. Joint membership is £12 per couple.

I enclose cheque for £ ..... **OR** I have completed Standing Order below for £ ..... per year.

NAME (1)	Mr / Mrs / Ms / .....		
NAME (2)	Mr / Mrs / Ms / .....		
ADDRESS			
POSTCODE		TELEPHONE	
EMAIL			
<b>General Data Protection Regulations</b>			
<i>The information you have provided to us on this application will be kept secure and will not be shared with any organisation or individual outside the Southwell Civic Society, other than where the law requires us to do so.</i>			
<b>Contact Preferences</b>			TICK
I consent for the Society to hold my data in the manner indicated above. THIS MUST BE TICKED			
I consent for the Society to use my email address for contacting me about Society business.			
I consent for the Society to use my email address to send me selected information from other Southwell amenity organisations.			
I have no email. Please contact me by letter.			
<b>SIGNATURE</b>		<b>DATE</b>	

**Gift Aid Declaration**

**Please treat as Gift Aid donations all money paid today and 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 April to 5 April) 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. I understand that other taxes such as VAT and Council Tax do not qualify. I understand the Society will reclaim 25p of tax on every £1 that I give.

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

Name ( please print ) .....

**Standing Order Instruction**

(If you can pay by Standing Order - please complete for the Society to send to your bank)

To: The Manager ..... Bank plc

Address of bank: .....

Please pay the sum of £6 / £12 ( **delete whichever is not applicable** ) at once, and on the 1<sup>st</sup> January every year until further notice.

To: THE SOUTHWELL CIVIC SOCIETY ( Account No. 00007836 ) at CAF BANK LTD, Sort Code 40-52-40, 25 Kings Hill, West Malling, Kent. ME19 4JQ and debit my/our account accordingly.

Name in capitals .....

Address .....

Bank Sort Code ..... Bank Account No. ....

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