**MEMBERSHIP APPLICATION FORM**

**Name:** ………………………………………………………………………………………………………………………………………………………………… **Membership No:** ……………………………

**Date of Birth:** (if under 18 years on 1st.January.2020) ……………………………….

**Address:** ……………………………………………………………………………………………………………………………………………………………………………………………………………………….

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**Email Address:** …………………………………………………………………………………………………..…………………… **Telephone No:** …………………………………………………………..

**Type of Membership:** (Please tick one of the following):

**Adult** (16-65yrs) (1 Year) **£25.00. ….** **Family/Joint:** (2 + 2) (1 Year) £40.00. …. **Senior:** (65yrs +) (1 Year) **£20.00. ….**

**Life: Life Membership can be obtained at Twenty Times the Annual Adult or Family Subscription Rate.**

**Total amount of payment enclosed £**……………………..(including a donation of £……………… towards ongoing projects)

Second Adult’s Name: ………………………………………………………………………………………………………………………………………………...………………………………………………...

Child’s Name: ……………………………………………………………………………………………………………………………………. Date of Birth:…………………………………………………...

Child’s Name: ……………………………………………………………………………………………………………………………………. Date of Birth: …………………………………………………..

Cheques should be made payable to ‘**Foxcote Manor Society’.** And sent with the completed form and a **STAMPED ADDRESSED ENVELOPE TO:**

**FMS Membership Dept., c/o 29 Avington Close, TILEHURST, Reading, Berkshire. RG31 5LW**

Alternatively, pay by Bank transfer to Barclays Bank, Sort Code: 20-24-09 Account No: 30393614, Account Name: **‘Foxcote Manor Society’**, with **your name as a reference.**

**Data Protection Statement**

1, We maintain your details for the purposes of communicating information relating to the activities of **‘Foxcote Manor Society’,**

2. We maintain records to comply with legal requirements (i.e. Gift Aid), where separate consent has been provided.

3. We do not share your details with any other party.

4. You may write to us to request erasure of your data,

**5. You may request a copy of the data held by writing to; The Membership Secretary, Foxcote Manor Society, c/o 29 Avington Close, TILEHURST, Reading, West Berkshire. RG31 5LW** or emailing: 7822membership.sec@gmail.com

**(Please Tick)** I have read the above and give consent to my data being held with my signature below.

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**Gift Aid Declaration.** (if you are a UK Taxpayer please complete this declaration).

**In order to Gift Aid your payment you must tick the box below:**

I want to Gift Aid my donation of £……… and any donations I make in the future or have made in the past 4 years to:

**Foxcote Manor Society.**

Full Name: Mr/Mrs/Miss/Ms **…………………………………………………………………………………………………………………………………………………………………………………….**

**Address: ………………………………………………………………………………………………………………………………………………………………….. Post Code: …………………………..**

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. I understand the charity will reclaim 25p of tax on every £1 that I donate.

Signed: ………………………………………………………………………………………………………………………………………………….. Date: ……………………………………………………………

Please notify the charity if you (1) Wish to cancel this declaration (2) Change your name or home address (3) No longer pay sufficient tax on your income and/or capital gains. If you pay Income tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid Donations on your Self-Assessment Tax Return or ask HM Revenue and Customs to adjust your tax code.