



## ASSOCIATE MEMBERSHIP APPLICATION FORM

### Thank you for your support

I wish to register myself and members of my household as Associate Members of Friends of Myton Pool Trust Limited (otherwise known as FROMP).

By paying an annual fee of £12.00, I will be supporting the aims and objectives of FROMP as displayed on its website [www.fromp.org.uk](http://www.fromp.org.uk).

Title ..... Name .....

Names of household members (ages if under 18)

.....

Address ..... Postcode .....

e-mail ..... Telephone .....

### Boost your donations by 25p of Gift Aid for every £1 that you donate

Gift Aid is reclaimed by the Charity from the tax that you pay for the current year. Your full address is needed in order to identify you as a UK taxpayer. In order to Gift Aid your donations you must put a tick or cross in the box below.

I want to Gift Aid any donations I make in the future or have made in the past 4 years to Friends of Myton Pool Trust Limited, Registered Charity No. 1133492.

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.

*Note: 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.*

Please notify Friends of Myton Pool Trust Limited if you want to cancel this declaration, change your name, or home address, or no longer pay sufficient tax on your income and/or capital gains.

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

Please sign and return the completed application and the top portion of the completed Subscription Payment Sheet to the Membership Secretary % 24 Ward Grove, Warwick CV34 6QL

## **DATA PROTECTION**

The data provided on this form will be used solely for administrative purposes including, but not limited to:-

- Maintaining appropriate records of membership (Membership Secretary and Treasurer)
- Claiming Gift Aid whenever you have chosen to Gift Aid your donation (Treasurer)
- Keeping you informed of the proceedings of Board Meetings and other matters affecting the day-to-day management of Myton Pool (Membership Secretary)
- Informing you about forthcoming social events and Working Parties (Membership Secretary)

**NO DATA WHATSOEVER WILL BE FORWARDED TO THIRD PARTIES OTHER THAN THAT NECESSARY IN ORDER TO CLAIM GIFT AID**

By signing the Application Form overleaf, I agree to Friends of Myton Pool Trust Limited keeping my data for the purposes outlined above.



## SUBSCRIPTION PAYMENT SHEET

Please choose one of the following payment options.

I enclose £12.00 in cash, or my cheque made payable to FRIENDS OF MYTON POOL TRUST LIMITED, for the subscription year 1 September 20.... to 31 August 20....

OR

I will pay by BACS to Friends of Myton Pool Trust Limited, Sort Code 60-83-01, Account Number 20229023 for the subscription year 1 September 20... to 31 August 20...

OR

I undertake to submit the following Standing Order Mandate to my Bank or Building Society, namely

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for first payment on .....

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



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## STANDING ORDER FORM

(to be detached and sent direct to your Bank or Building Society)

**PLEASE DO NOT send this to FROMP**

To (name of Bank or Building Society) .....

Address of Bank .....

.....

Account Name.....

Sort Code ..... Account number .....

Please pay for the benefit of Friends of Myton Pool Trust Limited at

UNITY TRUST BANK, Birmingham

Sort Code 60-83-01 Account Number 20229023

The sum of £12.00 on ..... 20\_\_\_ and thereafter on  
1 September each year until further notice from me.

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