## CITY OF WINCHESTER TRUST MEMBERSHIP APPLICATION FORM

PLEASE RETURN YOUR COMPLETED FORM TO:

The Secretary, City of Winchester Trust, 32 Upper Brook Street, Winchester SO23 8DG secretary@cityofwinchestertrust.co.uk www.cityofwinchestertrust.co.uk



TITLI				TYPE OF MEMBERSHIP	
FIRS	Г NAME			Single (£20 pa)	
SURNAME				Family/Household (£30 pa) (2 adults + children under £21)	
ADD	RESS			Corporate (£50 pa) (Business, society, college etc)	
				Life – single (£300)	
POST	CODE			Life – double (£400)	
TELEPHONE					
EMA	IL				
Unde	an send you our r	ection rules, we ne newsletter and inf	formati	r consent for us to communicate with you, so the poly about events and other Trust activities. Pleas	
_		•		hat we may communicate with you via:	
	Telephone Email (to infor		about t	rips/walks and major developments within the City)	
			olicies can	pe provided on request and are available on our website	
VOL	JNTEERING WITH	I THE TRUST			
	velcome members v d like to get involve		•	Trust with its work. Please tick the boxes below if yoreas:	u
	Giving or organising Planning Trust archives	ng talks		Publicity/public relations Trust summer walks or visits programmes Winchester Heritage Open Days	

**PRESIDENT** 

Professor Joy Carter DL VICE PRESIDENTS

Sir Donald W Insall CBE FSA RWA FRIBA FRTPI SPdip (Hons)
Captain Antony Skinner Royal Navy



THE CITY OF WINCHESTER TRUST LTD

www.cityofwinchestertrust.co.uk Registered in England No 609812 Registered Charity No 251798

## **PAYMENT**

To minimize administrative costs, we prefer payment by standing order and to have a single membership annual renewal date in May. **Please complete the standing order form below.** 

As your standing order will not activate until May, please send a cheque for the appropriate amount to cover your subscription for the current year.

Cheque for £ \_\_\_\_\_ enclosed

We would be very grateful if you would gift aid your membership payment

	ION – for past, present and future payments – boost the value of your payment by 25p for to Gift Aid your payment you must tick here   □
made in the past four year Income Tax and/or Capita responsibility to pay any	<b>UST</b> – I wish to Gift Aid my payment of £ and any donations I make in future or have are to the City of Winchester Trust. I am a UK tax payer and understand that if I pay less al Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year, it is my difference. I understand that taxes such as VAT and Council Tax do not qualify. I ity will reclaim 25p of tax on every £1 that I give.
FULL NAME	Post Code
HOME ADDRESS	
Signature	Date
no longer pay sufficient tax	nchester Trust if you (a) want to cancel this declaration, (b) change your name or home address or (c) on your income and/or capital gains.  Tred to submit names and addresses of donors to HMRC in order to recover Gift Aid.
	STANDING ORDER MANDATE
То	Bank
Bank Address	
	Post Code
Account Number	Bank Sort Code
Please pay to Barclays Ban Number 90972851) the su May until further notice.	$\kappa$ plc, (sort Code <b>20-97-01</b> ) for the account of City of Winchester Trust Limited ( <b>Account</b> m of £ on 1st May following the date of this mandate and thereafter annually on 1 <sup>st</sup>
Signature	Date
Name	
Address	

Post Code \_\_\_\_\_