

MEMBERSHIP APPLICATION FORM

Please return to the Membership Secretary at
u3a.ross.membership@gmail.com

or

12 Woodmeadow Road, Ross-on-Wye HR95QG

Membership options and fees:

Individual - £16 full year (April- March) or £10 part year (October - March)

Joint (two people at same address) - £27 full year (April- March) or £17 part year (October - March)

Associate - For members of other u3as. Please contact Membership Secretary

Contact details. - u3a.ross.membership@gmail.com or 0300 0301043

Member details for Individual or First joint member. Please PRINT details.

Title _____ First Name _____ Last Name _____

Known as _____

Address _____

Postcode _____ Mobile No _____ Landline No _____

Email Address _____

Privacy Statement - The data you provide will be stored securely, used to communicate with you as a u3a member, shared with coordinators of applicable interest groups and distributors of Third Age Matters magazine (if applicable) and used for Gift Aid (if applicable) purposes.
I consent to my data being stored and used as described.

Signed _____ Date _____

Special considerations – Is there anything you wish to make us aware of in relation to accessing a u3a activity?

In Case of Emergency (ICE) - Please provide details of the person we should contact in the event of an accident or health problems. (Please make them aware that you have provided their details).

Name _____ Relationship to you _____

Mobile _____ Landline _____

Do you wish to receive the Third Age Matters magazine (*included in membership fee*)? **YES/NO**

Are you interested in working with committee members to support of u3a? **YES/NO**

Member details for Second joint member. Please PRINT details.

Title _____ First Name _____ Last Name _____

Known as _____

Mobile No _____ Landline No _____

Email Address _____

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Mobile _____ Landline _____

Are you interested in working with committee members to support of u3a? **YES/NO**

Payment details. Please note that bank transfer is our preferred payment method

Amount paid	Payment Option
	By BACS payable to: Ross & District u3a, Sort Code 54-30-51, Account No. 19424728. Please use your full name as the reference
	By cheque made payable to: Ross & District u3a

Gift Aid: Please sign this declaration if you can. It will increase the value of your donation at no extra cost to you and will give us valuable additional income. If you pay income tax or capital gains tax, Gift Aid can be claimed from HMRC at a rate of 25p for every £1. Only one of joint member should sign.

I confirm that I am a UK taxpayer and would like Ross & District u3a to claim the Gift Aid for past, present and future donations, and that I pay the same amount or more of UK tax as all charities will claim on my gifts in a tax year and that I am responsible to pay any difference.

I am a UK taxpayer and I understand it is my responsibility to advise Ross & District u3a if my tax position, name or address change.

Signed _____ Date _____