

Membership Application Form

Title _____	Address _____
First Name _____	_____
Surname _____	_____
Date of Birth _____	City _____
Home Telephone _____	County _____
Mobile Telephone _____	Post Code _____ Country _____
Email _____	

Proposed	Seconded
Proposed by _____	Seconded by _____
Membership No _____	Membership No _____
Signature _____	Signature _____

Membership Category

Fees current for 2011. Please tick one box only.

Society Member only	£30	<input type="checkbox"/>			
			Leicester	London	Birmingham
Society & Branch Member	£80	<input type="checkbox"/>	£55	<input type="checkbox"/>	£80 <input type="checkbox"/>
Branch contributor	£80	<input type="checkbox"/>	£55	<input type="checkbox"/>	£80 <input type="checkbox"/>

Data Protection

I wish to be informed using the following methods of communication

SMS Written e-mail

I wish my details to be included in the circulation for private invitations

Yes No

I wish my details be included in the DBWS national address directory

Yes No

Gift Aid

Please treat all gifts of money that I have made in the past 6 years and all future gifts of money that I make from the date of this declaration as Gift Aid donations.

Yes No

You must pay an amount of Income Tax and/or Capital Gains Tax for each tax year (6 April one year to 5 April the next) that is at least equal to the amount of tax that the charity will reclaim on your gifts for that tax year.

Signature

I agree to abide by all the societies rules and regulations.

Signature _____

Date _____

For DBWS use only

Approved at branch level President _____ Secretary _____ Date _____

Approved at society level President _____ Secretary _____ Date _____