

MEMBERSHIP APPLICATION FORM

Annual subscription £5 or £6 for two named persons at same address
(If you felt able to add a little extra to your annual subscription to support the
Dog Fouling Prevention Scheme, it would be most welcome.)

PLEASE PRINT

Surname First name

Address

..... Postcode

Phone number Date

Email

2nd person at same address

Surname First name

Email

**The most efficient way for subscriptions to be paid for the Association
(and for members) is by a Standing Order, to be paid annually on 1st January.**

I have made arrangements with my bank to pay £.....annually by Standing
Order payable to 'The Bosham Association', on 1st January until further notice.

As a member I/we consent to The Bosham Association holding my/our name(s),
address, email address(es) and payment details on the membership register.
I/we consent to the Association sending newsletters and other communications via
email to the registered address(es).

Name Signature

Name Signature

Bank details:

Name: The Bosham Association, Bank: Lloyds Bank, Chichester, A/C:24334968,
Sort Code:30-91-97. Please give your initial and surname as the reference.

**Subscriptions can also be paid annually in January by online bank transfer, cash,
or cheque (payable to The Bosham Association) to the Membership Secretary.**

☐ I have paid by online bank transfer ☐ I enclose Cash/Cheque for £.....
for my/our subscriptions for 20.....

Data Protection

The only personal data of members that the Association will hold will be of contact and subscription payment details. This data will only be accessed by the current Treasurer, Membership Secretary, and the Chair.

**Please sign the Gift Aid Declaration below if applicable, and return this form to:
The Membership Secretary, Tenets, Crede Lane, Bosham, PO18 8NX
Email: bosassocmembership@gmail.com**

GIFT AID DECLARATION

I authorize The Bosham Association to reclaim the tax on all subscription payments and donations that I have made since 6 April 2000, together with all such future subscription payments and donations that I may make from the date of this declaration, until such time as I may notify you otherwise.

I confirm that I currently pay tax and that I will cancel this declaration should I cease to pay sufficient tax (see Note*) to cover the amount due to be reclaimed by virtue of this Gift Aid Declaration

Please provide individual signatures for joint Declarations

1st person’s declaration.....

Date.....

2nd person’s declaration.....

Date.....

**Note: You must pay an amount of income tax (encompassing any dividend tax credit) and/or capital gains tax that is at least equal to the amount of tax that The Bosham Association reclaims on your subscription payments and donations in each tax year. These Declarations will enable the Association to reclaim tax on all of your subscriptions past, present, and future.*

Registered Charity No. 262454

HMRC Charity Ref. XN24228