

Membership Application



Please complete this form and send it to:

The Membership Secretary,
Shrewsbury and Newport Canals Trust,
Brookfield, Wroxeter, Shrewsbury, SY5 6PH

Applicant Name: *(please print)*

Spouse/Partner/Other*:

Other Family Members*:

Address:

Post code:

Your email address:

Home telephone number:

Mobile telephone number:

Where did you hear about the Trust?:

Please tick if you permit the Trust to email you on other canal related matters in addition to Trust business.

I would like the Trust's newsletter to be sent by email

Skills offered: *(please tick relevant boxes)*

- | | | | |
|------------------------|--------------------------|-------------------------|--------------------------|
| Supporting Member only | <input type="checkbox"/> | Administration | <input type="checkbox"/> |
| Physical Restoration | <input type="checkbox"/> | Archives & Publications | <input type="checkbox"/> |
| Publicity | <input type="checkbox"/> | Fund raising | <input type="checkbox"/> |
| Stalls/displays | <input type="checkbox"/> | | |

Any specific skills or relevant background to offer?

MEMBERSHIP FEES *(tick as appropriate)*

- | | | |
|--|---------|--------------------------|
| Individual Membership | £8.50 | <input type="checkbox"/> |
| Family Membership* | £10.00 | <input type="checkbox"/> |
| Life Membership (including spouse/partner) | £200.00 | <input type="checkbox"/> |
| Life Membership (single member) | £150.00 | <input type="checkbox"/> |
| Group / Corporate Membership | £20.00 | <input type="checkbox"/> |

*Family membership is people living at the same address. Only one copy of newsletters and other material is sent per family membership. Only one family member will be entitled to vote.

Voluntary donation £ _____ Total enclosed £ _____

*I/we wish to apply for membership of the Shrewsbury and Newport Canals Trust and agree to be bound by the provisions of its Memorandum and Articles of Association
Cheques payable to Shrewsbury and Newport Canals Trust please
If possible make your subscription by Standing Order (see over)*

Signed: _____ Date: _____

Please complete both sides of the form as applicable

The Shrewsbury & Newport Canals Trust is a non-profit-distributing Company Limited by Guarantee, (Registered No. 4075920), Registered Charity (No. 1088706)
Registered address: 4 Arscott, Pontesbury, Shrewsbury SY5 0XP

Gift Aid Declaration

Boost your donation by 25p of Gift Aid for every £1 you donate.

Gift Aid is reclaimed by the charity from the tax you pay for the current tax year. Your address is needed to identify you as a current UK taxpayer.

In order to Gift Aid your donation you must tick the box below

I want to Gift Aid my donation of £ _____ and any donations I make in the future or have made in the past 4 years to **The Shrewsbury & Newport Canals Trust**.

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.

My Details

Title: _____ Forename(s): _____

Surname: _____

Home address: _____

Postcode _____

Please notify the charity 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.

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.

Signature: _____ Date: _____

Standing Order

Name of your bank: *(block capitals)*

Full address of your bank:

Postcode: _____

Please pay NatWest Bank plc.

217 Dean Street, Telford Town Centre TF3 4BB

For the credit of **The Shrewsbury and Newport Canals Trust**
Sort Code: **60-21-57** Account Number: **53710002**

The sum of £..... onand on the same date each year until further notice.

Please use your name as reference.

This notice **does/does not** replace any other Standing Order in favour of The Shrewsbury and Newport Canals Trust.

Signed: _____ Date: _____

Name: _____ *(please print)*

Home phone number: _____

Your account name: _____

Your account number: _____ Sort code: _____

For office use only

Date Received

Membership No.

Please complete both sides of the form as applicable

The Shrewsbury & Newport Canals Trust is a non-profit-distributing Company Limited by Guarantee, (Registered No. 4075920), Registered Charity (No. 1088706)
Registered address: 4 Arscott, Pontesbury, Shrewsbury SY5 0XP