



OFFICE USE	
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## APPLICATION FOR MEMBERSHIP

I wish to apply for membership of the Cotswold Canals Trust (Reg Charity 269721)  
I have completed the Banker's Order **or** I enclose my subscription for the first year.

### MEMBERSHIP TYPE - PLEASE TICK YOUR CHOICE

**Family:** £15     **Adult** £10     **Life Membership** £250     **Joint Life:** £350   
**Senior Life** £150     **Senior Joint Life -** £250     **Corporate** £25 min.

Please indicate amount of any additional donation £ .....

### MEMBER/S CONTACT DETAILS - PLEASE PRINT

The Trust collects and keeps your personal data to administer your membership of the organisation.  
We will not disclose your details to any other organisation.

First name..... Last name.....

First name..... Last name.....

Organisation (If Corporate Membership).....

Address .....

Postcode..... Telephone.....

Email ..... **Date of Application** .....

### UK INCOME TAX PAYER - GIFT AID DECLARATION

**To: The Cotswold Canals Trust (CCT) – Charity No. 269721**

I would like to Gift Aid this donation, any donations I have made over the past 4 years, and any future donations.  
I confirm that I have paid, or will pay, an amount of Income Tax and/or Capital Gains Tax for the current year (6 April to 5 April) that is at least equal to the amount of tax that all the charities and Community Amateur Sports Clubs that I donate to will reclaim on my gifts for the current year. I understand that:

- CCT will reclaim 25p of tax on every £1 that I have given
- Other taxes such as VAT and Council Tax do not qualify
- I can cancel this Declaration at any time by notifying CCT
- If I pay tax at the higher rate I can claim further tax relief via my Self Assessment tax return and can obtain further information on qualifying for Gift Aid Tax Relief at [www.hmrc.gov.uk](http://www.hmrc.gov.uk)

Donor's Signature ..... Date Signed.....

Print Donors name .....

### BANKER'S ORDER

If you bank with TSB, please give your Branch name and address including postcode.

To: Name of bank  
or building society .....

Bank address .....

..... Postcode .....

Please pay Barclays Bank plc, Southgate Street, Gloucester for account 'Cotswold Canals Trust', sort code **20-33-83**, Account no. **80867861** the sum of £                    on \_\_\_\_/\_\_\_\_/\_\_\_\_ and on the same date EVERY YEAR until further notice.

Account holder's signature .....

First name ..... Last name.....

Address .....

.....Postcode .....

Account No. ....Sort Code.....

**OFFICE USE ONLY:** Bank - please quote this reference on all payments:

**This Bankers Order DOES NOT cancel any existing orders to the Cotswold Canals Trust or The Stroudwater-Thames and Severn Canal Trust**

Thank you. Send to: **The Membership Secretary, Cotswold Canals Trust, Bell House, Wallbridge Lock, Stroud Gloucestershire GL5 3JS**