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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 £20 **Adult** £15 **Life Membership** £350 **Joint Life** £450

Senior Life £250 **Senior Joint Life** £350 **Corporate** £40 min.

Please indicate amount of any additional donation £

MEMBER/S CONTACT DETAILS - PLEASE PRINT CLEARLY

**The Trust collects and retains your personal details to administer your membership.
The Trust will not disclose your details to any other organisation.**

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

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

Organisation (If Corporate Membership).....

Address

Postcode..... Tel:..... Email:

I consent to receiving occasional communications from the Trust about important news, information, research and campaigns.

Tick consent boxes as appropriate - by post - by email - by telephone -

Date of Application: Applicant's Signature.....

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

Print Donor's Name:

Declaration Date: Donor's Signature:.....

BANKER'S ORDER

To: Name of bank or building society

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.

First name Last name.....

Address

..... Postcode

Account No. Sort Code.....

Account holder's Signature:

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**