

September []
April []



MEMBERSHIP APPLICATION FORM

Please fill in a new form if any of your details have changed and forward to the Membership Secretary (contact details below)

Title:	Surname:	First name:	Other initials:
--------	----------	-------------	-----------------

House no/name and street:	Town:
Postcode:	Preferred phone number:
Email:	
Instrument(s):	Please indicate the Regional Group(s)* that you attend and/or would wish to receive regular information about:

* Please visit the Cobweb Orchestra website (cobweborchestra.org.uk) for full details about each group.

Please select the type of membership you would like:

Full Membership	£40.00 []	Cash	
Non-tax payer membership	£25.00 []	Cheque	
Any additional donation	£	BACS	
Total	£		

GDPR permissions

The Cobweb Orchestra and the Cobweb Orchestra Regional Groups will use the information you provide on this form to get in touch with you, usually by email, to provide updates on weekly rehearsals and other Cobweb Orchestra news and events, and from time to time to inform you of related activities that may be of interest. Phone numbers or addresses may be used occasionally, for example in the event of an unexpected cancellation or a change of venue. Photographs may be taken solely for publicity purposes. Please tick the boxes below to give your consent to the following

- Email
- Photography
- Phone number/address

Signed: _____ Date: ____/____/____

Your information will never be shared with third parties, and you can unsubscribe at any time by using the unsubscribe option at the end of every newsletter. We will treat your information with respect. For more information about our privacy practices please visit the Cobweb Orchestra website (cobweborchestra.org.uk).

This form should be sent to:

Pat Fuller
Membership Secretary
1 Orchard Close
Morpeth
Northumberland NE61 1XE

or save/scan completed document & return by email to:
membership.cobwebs@gmail.com

Payment:

By cheque: Please make cheques payable to 'The Cobweb Orchestra', write 'membership' on the back, or

By BACS transfer: Pay to:

The Cobweb Orchestra Account No: 65560297
putting your initial and surname as the payee reference

Sort Code: 08-92-99

GIFT AID DECLARATION

Boost your contribution to The Cobweb Orchestra without costing you any extra money, by pledging GIFT AID

Title and Name: _____
Address: _____
Postcode: _____
I am a UK taxpayer. Please reclaim the tax on all of my donations to THE COBWEB ORCHESTRA made since April 5 th 2008 and any I make in the future, until I notify you otherwise.
Signed: _____ Date: ____/____/____

You must pay an amount of Income Tax and/or Capital Gains Tax at least equal to the tax that the charity reclaims on your donations in the appropriate tax year. (currently 25p for each £1 you give). Please let us know if you no longer pay tax.

You may end this arrangement at any time.

Please tell us if you move house, change your name or change your bank.

This Gift Aid Declaration Form should be sent to:

Christine Ball Cobweb Gift Aid Declaration 35 South Hill Road, Gateshead NE8 2XZ.
or save/scan completed document & return by email to: christine.ball1208@live.co.uk