M

CPGT MEMBERSHIP RENEWAL FOR
Adult Member
Membership No.
Joint Member (Second Adult at same address)
Membership No.
Address
Tel. No

ionesrb1@gmail.com

E-mail

<u>. </u>		
Annual Subscription Category	Cost	No.
Adult	£15	
OR Joint Adult (2 at same address)	£25	
Student (Full-time education)	£5	
TOTAL SUBSCRIPTION	£	
Donation	£	

Please indicate which of the following are enclosed

Payment	£
OR Standing Order Authority Form*	Y/N
Gift Aid Declaration Form†	Y/N

Please make cheques payable to

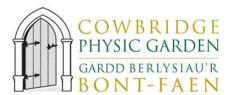
'Cowbridge Physic Garden Trust Ltd.'

or

Pay direct into our bank account quoting your membership number:

Sort code: 40-18-18, Account number:21742434

I/we are interested in becoming (a) volunteer(s) Y/N



GIFT AID DECLARATION

Please tick one of the boxes below

$\square_{\mathbf{V}_{e}}$	es - I am a UK taxpayer and I would like
	* •
Cow	bridge Physic Garden Trust Limited to treat as
Gift	Aid donations all membership subscriptions and
dona	ations made in the four years prior to this
decl	aration and in the future.
I unc	derstand that if I pay less Income Tax and/or
Cani	ital Caine Tay than the amount of Cift Aid claims

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.

No – I am unable to Gift Aid this membership subscription/donation.

Please notify the charity if you:

- want to cancel this declaration
- change your name or home address
- no longer pay sufficient tax on your income and/or capital gains.

Name and signature of the member making the declaration

Name .	••••	 		 • •	 	•	••		 	 	•				 •	 		•		 	
Signatu	re	 	. 	 					 	 	• •	D	ai	te					 	 	

Cowbridge Physic Garden Trust Limited Registered Charity Number: 1110127, Company Number: 5118600 Registered Office: Old School House, Colwinston, Cowbridge, Vale of Glamorgan, CF71 7NE

* If you agree to pay your Subscription by Standing Order you will save our administration costs.

STANDING ORDER AUTHORITY

Name	and Ac	idress c	of your	bank			
То						В	ank
Addre	ss						
	• • • • • • • • • • • • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • •		• • • • • • • • • • • • • • • • • • • •	••••
				Pos	tcode		
		t Numl					
Your S	Sort Co	de	•	•		•	
1001	011 00	-			-		
Name	of you	r Accou	ınt				
Pleas	e pay	until f	urther	notic	e the s	sum of	f
£							
				then		lly fro	m
(date	of firs	st payı	ment r	next ye	ear)		
/	/20	0					
				len Tru			
)-18-18 1ber: 21		C, Cowl	bridge		
Signat	ure						
Date							
Pleas	e refu	rn to t	he CP	GT at	Addre	ess be	low

Do not send direct to your Bank