

The Harwich Society Membership Application Form

I wish to apply for Membership of the Harwich Society

TYPE OF MEMBERSHIP (Please Tick Relevant Box)

Membership Type

	Annual Fee	Please Tick
Adult – Per Person	£8.50	
Family 2 adults at same address & all children under 18	£15.00	
Senior – Per Person	£6.00	
Student under 18 or in full time education	£5.00	
Overseas Member (Highlight Emailed)	£10.00	
Overseas Member (Highlight Posted)	£18.00	
Corporate Member Not for Profit	£11.00	
Corporate Member Commercial	£25.00	

Members Details	Please Complete
Full Name	
Address	
Town	
County	
Country	
Postcode/Zip	
Telephone	
Mobile	
Email	

Now please complete the Standing Order instructions on page 2

For use by the Membership Secretary

Membership Number : _____

Payment Method: Standing Order

The Harwich Society Subscription Standing Order Form

To the Manager

Bank Details	Please Complete
Bank Name	
Address	
Town	
County	
Country	
Postcode/Zip	
Bank Account No	
Bank Sort Code	
Account in Name of	

Dear Sir/Madam,
Please make payments to:
The Harwich Society
Account No 65781568
Sort Code 08-92-99
The Co-operative Bank, Olympic Court, Salford. M5 2QP

Amount £ _____

Signed _____

First payment: Immediately
Subsequent payments: 1st January Annually
Duration of payments: Until such time as notice of cessation is given in writing.
This Standing Order supersedes all previous Standing Orders to the Harwich Society

Gift Aid is a simple way for a charity to increase the value of money, including membership subscriptions that we receive from UK tax payers. It allows us to claim back 25p for each £1 you give us, thus increasing your donation by a further quarter. Please complete the GiftAid page to allow the Harwich Society to claim this additional funding.

Please return all pages to:
The Membership Secretary
The Harwich Society
5 Church St
Harwich
Essex
England
CO12 3DR



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GIFT AID DECLARATION

Name of Charity: The Harwich Society
Registered Charity No 1161931

I wish the Charity to treat all gifts of money that I have made in the past 4 years as well as all future gifts.

Title	
Forename	
Surname	
Address	
Town	
County	
Postcode	

Signature _____

Date _____

You must pay an amount of UK Income Tax and/or Capital Gains Tax for each year (6th April one year to 5th April the next) that is at least equal to the amount of tax that the charity will reclaim on your gifts for that tax year.

Please notify the Harwich Society in the future 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