

FRIENDS OF THE PORTER VALLEY MEMBERSHIP FORM

PLEASE RETURN COMPLETED FORM TO :-

**Membership Secretary
Friends of the Porter Valley
30 Brooklands Avenue
SHEFFIELD S10 4GD**

Name.....

Address (FULL Address....please).....

.....
.....

Telephoneemail address

If you prefer not to complete the Bankers Order form, then include a cheque, payable to Friends of the Porter Valley - **£10 standard, £15 family (2 adults), £5 concessions.**

Please complete the **Gift Aid Form** as it allows us to reclaim your tax !

We are also able to take CAF cheques - if you use these, please *don't* complete the Gift Aid form.

Bankers Order Form

To the Manager (insert your bank branch name and address)

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.....

Pay CafCash, Kings Hill, West Malling, Kent, ME19 4TA, sort code 40-52-40,

Acc. no. 00006943, Friends of the Porter Valley, the sum of £..... * each year starting on
the ...28 th. day ofuntil further notice and debit my account:

Please make the first payment date at least 3 weeks ahead of the date you send this form.

Account name.....

Account number..... Bank sort code.....

Signed Date

*** annual membership: £10 standard, £15 family (2 adults), £5 concessions.**

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Gift Aid Form

(Please complete this - it allows us to claim money back from the Inland Revenue)

I / We (Full name)

.....

Of (Full Address).....

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I / we declare that I / we pay UK tax and would like Friends of the Porter Valley (registered charity no.1069865) to treat all donations made by me / us since 4th April 2000 and all future donations to be made under the Gift Aid Scheme until I /We notify you otherwise.

Signed.....

Date