

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)

.....

.....

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.**

XX

Gift Aid Form

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

I / We (Full name)

.....

Of (Full Address).....

.....

.....

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