

## Sussex Ouse Restoration Trust – Membership Application Form

Please place a circle around your chosen membership **category** below:

UNWAGED / STUDENT / RETIRED -----	£	6
INDIVIDUAL -----	£	10
JOINT RETIRED (entitled to 2 votes per household)	£	12
FAMILY (entitled to 2 votes per household) -----	£	15
CORPORATE -----	£	25
LIFE MEMBERSHIP (one off payment) -----	£	200
ADD (if you wish) a donation to the restoration fund	£	_____
TOTAL (subscription and donation) -----	£	_____

I/we apply to the Sussex Ouse Restoration Trust Ltd Council of Management to become a member(s) of the Trust and I/we hereby agree, if elected, to be bound by the provisions of the Memorandum and Articles of Association of the Trust, and enclose a cheque in favour of the 'Sussex Ouse Restoration Trust Ltd' in respect of my/our total subscription and donation. Please note that the subscription year runs from January 1st to December 31st. Your first subscription will cover the period from the date of joining until the 31st December of that year. Subsequent subscriptions will fall due on the **1st of January** each following year.

Please delete either of the following statements if not applicable:-

- I am a UK taxpayer and understand that if I pay less Income Tax and / or 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.
- I agree to my details being stored on the Trust's database for use by authorised Trust officials only for the sole purpose of managing my membership of the Trust.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

### **Please complete the following details in block capitals:-**

Title (Mr/Mrs/Ms etc.): \_\_\_\_\_ First or Given Name: \_\_\_\_\_

Last or Surname: \_\_\_\_\_

Address: \_\_\_\_\_ Post Town: \_\_\_\_\_

County: \_\_\_\_\_ Post Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

e-mail: \_\_\_\_\_

Nominated 2<sup>nd</sup> voting family member (family membership): \_\_\_\_\_  
(to be eligible to vote, this person must live at the same address and be over 18 years of age)

**If you would like to join in and help with the restoration either on an occasional basis or as a regular team member, or feel you have a particular skill / ability which would benefit the Trust, please indicate your interest :- Working Parties; Fund-raising; Publicity; Environmental / Conservation advice; Administration; Other (please specify):**

\_\_\_\_\_

### **Please complete the Banker's Order form below (if appropriate):- To your Bank: -**

Name of Bank: \_\_\_\_\_ Sort Code: \_\_\_\_\_ Account No: \_\_\_\_\_

Bank Address: \_\_\_\_\_

Please pay to Lloyds TSB Bank, 82 High Street, Lewes, (sort code 30-95-01) for the credit of the 'Sussex Ouse Restoration Trust Ltd', A/C No. 02310952, the sum of: £\_\_\_\_\_ now and annually on the 1<sup>st</sup> January each year.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**To the Bank:** Please quote the following membership number when making payment (to be completed by the Membership Secretary): \_\_\_\_\_

### **Please return this form to:**

The Membership Secretary, SORT, The Gatehouse, 25 Warnham Road, Goring by Sea, West Sussex BN12 4LL