

Members **RENEWING BY POST** must complete the relevant sections and return the **UNCUT** form to the Membership Secretary

LRFHS MEMBERSHIP RENEWAL 2017

SECTION 1 – (to be filled in by ALL members)

Your Details

Membership No _____

TITLE – Mr, Mrs, Miss, Ms _____ SURNAME _____

FORENAMES _____

ADDRESS _____

_____ POSTCODE _____

Rate required (please indicate)

UK single **£13.00** _____ UK family **£15.00** _____ Overseas **£15.00** _____

Method of payment

Cheques made payable to LRFHS. **Foreign money orders not accepted.**

Sterling Cheque _____ Postal order _____ Cash _____ Standing Order _____

or via the Internet at **www.lrfhs.org.uk/join.htm**

SECTION 3 - BANK STANDING ORDER MANDATE

Only to be completed by members requesting payment by Banker's order **for the first time.**

TO THE MANAGER OF _____ BANK

BANK ADDRESS _____

_____ POSTCODE _____

Please pay the sum of £ _____ on the 2 January 2017 and annually thereafter to –

Leicestershire And Rutland Family History Society
National Westminster Bank, Leicester Hinckley Road Branch.
Account No. 15104354 Sort Code – 60-60-06

NAME _____ ACCOUNT NO. _____

SIGNATURE _____ DATE _____

This mandate supercedes all previous mandates

SECTION 2 - GIFT AID

A.

Do you wish to take part in the Gift Aid scheme, whereby the Society is able to reclaim the tax paid on your subscription?

You must be a UK tax payer to take part in the scheme.

Yes _____ No _____ (please indicate)

Please note that section 2 needs only to be filled in if you are a NEW subscriber to Gift Aid, OR your membership has lapsed, OR your name or address has changed.

B.

I wish the LRFHS to treat any subscription I make after April 2001 as a Gift Aid donation. You must pay an amount of Income Tax and/or Capital Gains Tax for each tax year (6 April one year to 5 April the next) that is at least equal to the amount of tax the LRFHS will reclaim on your gifts for that tax year.

SIGNATURE _____ DATE _____

HAVE YOU SIGNED THE DATA PROTECTION ACT?

(To be completed by any member wishing to participate in exchange of member's interests, **WHO HAS NOT ALREADY SIGNED**)

If you wish your surname interests to appear on the Society website or be printed in the Society Journal, you need to agree with the statement below. At no time will your address or email address appear on the Members Interests website. If you do not sign, your interests will be removed from the published database.

I agree that my name and address may be supplied to any person requesting it, either within or outside of the European Economic Area.

SIGNATURE _____

Email address (where applicable) _____

Return the Form to: Mrs Angela Slater, 7 Faire Road, Glenfield, Leicester LE3 8EE