This form need only be completed in full by NEW members or by existing members to notify us of a CHANGE to their personal details or CHANGE to their tax status for Gift Aid purposes

There are no restrictions on the numbers joining and a single form showing all first names and surnames can be used for a family or joint application. Please return this form the Membership Secretary**: David Rhys-Davies, 14 Offas Close, Benson, Wallingford. OX10 6NR** or by email to: ***davidrhysdavies1@gmail.com***

Title(1): **Initials:** **First Name:** **Surname:**

Title(2): **Initials:** **First Name:** **Surname:**

Address:
Postcode:

Email Address (1): **Home Tel No:**

Email Address (2): **Mobile No 1:**
Mobile No 2:

PAYMENT OF FEES

Membership Fee is £12 per person for annual membership or £120 per person for life membership

I have made a bank transfer payment of £ to: `**Bensington Society'**, Acct No: **21633260**, Sort Code: **30-99-03**
Reference: **Mship + (Name**)

Alternatively:

Contact the Membership Secretary (as above) to pay by **credit card or cash.**

GDPR

I agree to the statements below.

- *I agree to the Bensington Society holding the above personal information for the management of the Society.*
- *I understand I may request the removal of my personal information by contacting the Membership Secretary.*
- *I am content that the Society should send me information about the Society activities.*
- *I understand that the Society will normally contact me by email or phone unless I have notified the Membership Secretary that I prefer another method*
- *I understand I may change my preferences by contacting the Membership Secretary.*

Signed: Date:

Failure to complete the declaration may result in your membership application being delayed or refused.
You may read the Society's Privacy Policy on our website at ***www.bensingtonsociety.com*** or, alternatively, request a copy by email or post from the Membership Secretary at davidrhysdavies1@gmail.com

GIFT AID

ONLY REQUIRED FOR INITIAL MEMBERSHIP APPLICATION

Should you wish to Gift Aid your subscription, please complete the form and sign below:

Title: Initials: First Name: Surname:

House Name or Number: Postcode:

I wish to Gift Aid my/our individual or family membership subscription(s) of **£** and any membership subscriptions I make in the future or have made in the past 4 years to: **Bensington Society.** I am a UK taxpayer.

Signed: Date:

Please notify the Membership Secretary should you wish to cancel this declaration