# FRIENDS OF ST MARY & ST PETER'S, KELSALE CUM CARLTON **APPLICATION FOR MEMBERSHIP**

Date	
Title (Mr, Mrs, Ms, Dr)	
Forename(s)	
Surname	
Address	
Postcode	
Telephone	
Email	

## Payment

The amount you give is your choice (suggested minimum donation £15 single, £30 couple).

I attach a cheque made payable to 'Kelsale cum Carlton PCC' – marked 'Friends' on rear
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I have set up a standing order to 'k	Kelsale cum Carlton PCC – marked 'Friends'
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I have paid £..... by BACS (bank account details below)

## Gift Aid Declaration

I, (insert name) \_\_\_\_\_\_

of

request 'The Friends of St Mary & St Peter's Kelsale' to treat this and all future subscriptions/donations (until further notice) as Gift Aid donations. I am a UK tax payer and pay tax which covers the reclaimed amount.

By submitting this form I agree to my personal data being held by The Friends of St Mary & St Peter's Kelsale for the purposes of administering the organisation, and for contact regarding 'the Friends'.

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## Instructions to your Bank or Building Society to pay by Standing Order

To the Manager

Name of Bank \_\_\_\_\_

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

Post Code

Please pay my Friends subscription payment of £ \_\_\_\_\_ Annually/Six monthly/Monthly\*

(Delete as necessary)

Commencing on	and in each period until further notice to the following account:
Account name:	Kelsale cum Carlton PCC (marked Friends)
Sort Code:	09-01-52
Account Code:	01429705
Bank:	Santander

Your details below

Name	
Address	
Postcode	
Bank account number	
Sort code	

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return this completed form to the Treasurer, Friends of St Mary & St Peter's Kelsale, c/o 2 The Vines, Kelsale cum Carlton, Saxmundham, IP17 2PC.