**GRAPES HILL COMMUNITY GARDEN GROUP**

# APPLICATION FOR MEMBERSHIP / RENEWAL

|  |
| --- |
| **PERSONAL DETAILS**  |
| **Name:** |  |
| **Address:**  |  |
| **Email:** |  |
| **Tel:** |  |
| **SELECT TYPE OF MEMBERSHIP** (suggested donation) |
| **Type** | **Amount** | **Please select** |
| Individual - unwaged | £3.00 |[ ]
| Individual - waged | £10.00 |[ ]
| Group | £15.00 |[ ]
| **TOTAL AMOUNT**  |  |  |
| **Signed:\*** |  | **Date:** |  |

***\*****If you complete this form online, type your name instead of signing to indicate your agreement.*

|  |  |
| --- | --- |
| **Bank transfer**ACCOUNT NAME: Grapes Hill Community Garden GroupSORT CODE: 08-92-99 | ACCOUNT NUMBER: 65330773 PAYMENT REFERENCE: Your name and GHCGG Membership donation  | **Cheque**PAYABLE TO: Grapes Hill Community Garden Group SEND TO: GHCGG, 17 Constable Road Norwich, NR4 6RW  |

# GIFT AID DECLARATION (optional)

Please treat the above donation to Grapes Hill Community Garden Group of £ as a Gift Aid donation. I confirm I have paid or will pay an amount of Income Tax and/or Capital Gains Tax for the current tax year (6 April to 5 April) that is at least equal to the amount of tax that all the charities that I donate to will reclaim on my gifts for the current tax year. I understand that other taxes such as VAT and Council Tax do not qualify. I understand the charity will reclaim 25p of tax on every £1 that I have given.

**Donor’s details: *feel free to write “as above”, but please make sure we have your postcode and sign and date this declaration*.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Title:** |  | **First name(s):** |  |
| **Surname:** |  |
| **Home address:** |  |
|  | **Postcode:** |  |
| **Signed:\*** |  | **Date:** |  |

***\*****If you complete this form online, type your name instead of signing to indicate your agreement.*

