

Hill Close Gardens Trust



MEMBERSHIP APPLICATION & RENEWAL FORM

I/We wish to become member/s OR to renew membership of Hill Close Gardens Trust.

Annual membership: **Individual £28** **Joint £49** **Family £55**
Life membership (1 payment): **Individual Life £280** **Joint Life £490**

TITLE NAME(s)..... DATE.....

TEL.....E-mail.....

TITLE NAME(s)..... DATE.....

TEL.....E-mail.....

ADDRESS.....

.....POSTCODE.....

I/we also wish to add a donation of £..... Payment method: **bank transfer** (sort code 40-52-40, account 00009882) **cash** **card** **cheque** (payable to Hill Close Gardens Trust)

(If you prefer to pay by Direct Debit, please go to Hill Close Gardens website
www.hillclosegardens.com)

TOTAL ENCLOSED £.....

I/We consent to Hill Close Gardens Trust storing and using the data provided on this form solely for the purpose of communications by and in relation to HCGT, and that this data will not be shared with anyone else.

SIGNED..... DATE.....

SIGNED..... DATE.....

HILL CLOSE GARDENS TRUST GIFT AID DECLARATION

Please complete either section A or section B.

A I would like this and all future donations to Hill Close Gardens Trust to be Gift Aid donations. (In each tax year, you must pay an amount of Income Tax and /or Capital Gains Tax that is at least equal to the total amount of tax that all Charities or Community Amateur Sports Clubs (CASCs) will reclaim on your donations. Taxes such as VAT and Council Tax do not qualify. Please let us know if you change your address or wish to cancel this Declaration.)

B I have previously signed a Gift Aid Declaration to Hill Close Gardens Trust.
(If you are uncertain, please complete section A.)

SIGNED..... DATE.....

**Thank you for your support. Please return all forms to: The Membership Secretary,
Hill Close Gardens Trust, Bread & Meat Close, Warwick, CV34 6HF. (Tel: 01926 493339)**