The Friends of St Peter's MEMBERSHIP APPLICATION/DONATION

Please tick the applicable box/es, complete and return to: Johnny Billson, 27 East Street, Titchfield, PO14 4AD. Tel: 01329 510419



I/We wish to join the Friends of St Peter's (£10 per person per annum). I/We:

□ enclose the sum of £.....(Membership)

 \Box enclose the sum of £.....(Donation)

 \Box wish to pay by Standing Order and have completed the form overleaf.

□ Please treat as Gift Aid all membership fees and donations made today and in the future to the Friends of St Peter's. I confirm I have paid or will pay an amount of Income Tax and/or Capital Gains Tax for each tax year (6 April to 5 April) that is at least equal to the amount of tax that all the charities or Community Amateur Sports Clubs (CASCs) that I donate to will reclaim on my gifts for that tax year. I understand that other taxes such as VAT and Council Tax do not qualify.

Title	Surname
Forename(s)	
Address	
	Postcode
Email	
Phone numbe	r
Signature(s)	
Date	



Standing Order Instructions

ToBank
at
Postcode
Please pay to Santander
Sort Code 09 -01-56 Account No: 01896483
For "The Friends of St Peter's"
The sum of £
(amount in words)
Starting on theday of20
And thereafter on the same day each year until further notice from my account
Account No
Account Name
Sort Code

Please see the reverse of this form for my address and contact details.

Signature.....

