Rye, Winchelsea & District Memorial Hospital Ltd
incorporating The Friends of the Hospital at Rye

Registered Charity in England & Wales No. 1014232
Company No. 02740665

FRIENDS MEMBERSHIP FORM

Title ..... Name ……..

Address .....

……. Postcode .....

Email ..... Tel .....

Annual Subscription (minimum £5) £ …….

Renewal of Annual Subscription (minimum £5) £ …….

Life Membership (£50) £ …….

Donation £ .....

☐ I wish to pay/renew my Membership/Donation by online Bank Transfer to:

Rye, Winchelsea & District Memorial Hospital Ltd

HSBC Account no: 31052225 Sort code: 40-39-18

☐ I wish to pay my Annual Membership by Standing Order having completed a Standing Order form and passed this to my bank

Data Protection Act 1998
Please note that the Charity uses computer systems to record membership information. Under the Data protection Act 1998, it is necessary for you to be informed of this. The information you provide on your application and renewal form will only be used by the Charity's officials and task holders to conduct Charity business and will not be supplied to outside bodies in any form. If you have any questions or concerns over the data held, please contact the Company Secretary.

GIFT AID DECLARATION - Boost your donation by 25p of Gift Aid for every £1 you donate

Gift Aid is reclaimed by the charity from the tax you pay for the current tax year. Your address as completed above is needed to identify you as a current UK tax payer.

I confirm that I would like this and all subsequent donations to be treated as Gift Aid donations for the benefit of **Rye, Winchelsea & District Memorial Hospital Ltd**.

I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference.

Signature ..... Date .....

Please notify the charity if you:

- want to cancel this declaration;
- change your name or home address; or
- no longer pay sufficient tax on your income and/or capital gains.

If you pay Income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your Self-Assessment tax return or ask HM Revenue and Customs to adjust your tax code.

I give my consent for the Hospital at Rye to contact me by ☐ **Post** ☐ **Telephone** ☐ **Email**

☐ **I give my consent for the Hospital at Rye to keep me informed about news, events, activities and services**

Please return this form to the Charity Office Manager at Rye, Winchelsea & District Memorial Hospital Ltd, Peasmarsh Road, Rye Foreign, Rye, East Sussex TN31 7UD (Tel: 01797 228842)