Membership Application



Title First Name		Surname	
Address:			
Postcode:	Home Phone:	Mobile:	
Known as: E	Email: (write clearly please)		
	s person has given permissio	relative who can be contacted in the event of an on for East Antrim u3a to keep this information fo	r this
Name:	Relationship:	Tel:	
* Abide by the terms and condition * Treat fellow members with respect to the comply with and support the decomple to the committee of any chat to the cha	a movement. of the East Antrim u3a and not not softhe constitution of East ect and courtesy at all times. cisions of the elected comminance in your personal details onduct. Ship of East Antrim u3a, and	never do anything to bring it into disrepute. st Antrim u3a. s. nittee.	
Signed		Date	
Please hand in the completed form East Antrim u3a, 12 Nelson Street, bank details. We also accept paym the office. If you are a taxpayer, you Annual Membership Fees £28.00 Your fee also includes a membersh benefits and the direct mailing of *The Third Age Trust are the natio	m with payment at any mont, Carrickfergus BT38 8AR. Panent by debit or credit card of our may also wish to consider (pro-rated quarterly for new hip fee to the Third Age Trus Third Age Matters Magazine anal office to which all u3as a lable on our website.	v membership – June £21; September £14; Deceml st*, providing liability insurance cover and other e.	ost to quest in ber £7)
PRIVACY STATEMENT			

In signing you agree that your personal details will be held on a secure database, and you agree to accept u3a communication in this manner. Details will be used solely for the purposes of administration, to keep you informed about events, groups, and activities as part of your membership, and send you general information about the Third Age Trust. East Antrim u3a's lawful basis for collecting this information is legitimate interest. Your details will <u>never</u> be supplied to an outside agency or party other than for you to receive Third Age Matters which will be mailed directly to you. You can request your data not to be used at any time for these purposes by contacting us: sec@eau3a.org.uk

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For internal use:				
Membership Number:	Data Log Date:	Logged by:	Fee: £	card/ chq received by

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Under the General Data Protection Regulation (GDPR) East Antrim u3a (eau3a) needs your explicit permission to communicate with you by email and when calling you on numbers that are registered with the Telephone Preference Service. If you do not tell us that you want to hear from us, we will no longer be able to contact you via these means.

-	· •		C One tick for all communications: - mails and phone calls/Text**
Or choose fr	om the op	tions below	
Email	YES	NO	
Phone**	YES	NO	
Text**	YES	NO	
Magazine	YES	NO	
		_	elephone Preference Service (TPS))
I want to past 4 years I am a UK ta of the Gift A	as a currer Gift Aid m to the char xpayer and id claimed	ot taxpayer. In order y donation of £ rity, East Antrim Ur understand that if on all my donation	ne tax you pay for the current tax year. Your address is needed to er to Gift Aid your donation you must tick the box below: and any donations I make in the future or have made in the niversity of the Third Age – Registered Charity No NIC103317 I pay less Income Tax and/or Capital Gains Tax than the amount in that tax year, it is my responsibility to pay any difference.
My Details:	Title	First Name	Surname
Home addre	ess		
Postcode		Sign	ed Date
Please notify	y the Charit	y if you wish to:	
	, el this decl	•	
b. Char	nge your na	me or home addre	SS
c. No lo	onger pay s	ufficient tax on you	r income and/or capital gains tax

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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 as HM Revenue &

Customs to adjust your tax code accordingly.