



THE RUSSELL SOCIETY

Application for Membership

I wish to apply for Ordinary* / Family* / Student* / Junior* membership of the Russell Society and agree to abide by the rules of the Society. *Please delete as appropriate

Full name (in case of family membership please include all names)

Name(s): Title:

..... Title:

..... Title:

..... Title:

Address:

.....

..... Postcode:

Telephone: Email:

Signature:

Date:

Once completed please send this form together with your first subscription (cheques made payable to "The Russell Society") to the Membership Secretary below. Current subscription rates are given on the Membership Information page of the Society web site at www.russellsoc.org.

**Mr. Neil Hubbard,
Russell Society Membership Secretary,
30, Thirlmere Road,
Barrow-upon-Soar,
Leicestershire,
LE12 8QQ**

Notes: The Russell Society reserves the right to refuse membership in certain circumstances.

The Society operates a computer data-base containing members' names, postal and e-mail addresses for mailing, records and subscription purposes only. The Society is exempt from registration under the Data Protection Act. If you **do not** wish your name to be included on a membership list that will be periodically circulated to members please tick the box.

If appropriate please complete the Bankers Order below, and send to your bank, and the Gift Aid form and send this with your application.

Bankers Order

To: (Bank)

Address:

.....
Please pay to: Lloyds Bank plc, Kendal Branch (Sort Code 30-14-40), 11, Finkle Street, Kendal, Cumbria, LA9 4AG, now* and on 10th January annually until further notice, the sum of Pounds for the credit of THE RUSSELL SOCIETY Account No. 00286068

Signed: Full name:

Account No.: Date:

Address:

.....
*Cross out if not applicable. **Please pass this form directly to your bank**

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The Russell Society Gift Aid Form

Name of Charity: The Russell Society (Registered Charity Number 803308)

Details of donor:

Title: Surname: Forename(s):

Home address:

I want the charity to treat ** Please delete as appropriate*

- * The enclosed subscription of £..... as a Gift Aid donation.
- * The donation(s) of £..... which I made on .../.../..... as (a) Gift Aid donation(s).
- * All donations/subscriptions* that I make from the date of this declaration, until I notify you otherwise, as Gift Aid donations.
- * All donations/subscriptions* I have made for the six tax years prior to the year of this declaration, and all donations/subscriptions* I make from the date of this declaration, until I notify you otherwise, as Gift Aid donations.

Signed: Date: / /

Notes:

- You must pay an amount of Income Tax and/or Capital Gains Tax at least equal to the tax that the charity reclaims on your donations in the appropriate tax year.
- If in the future your circumstances change and you no longer pay tax on your income and capital gains equal to the tax that we reclaim, you can cancel your declaration.
- If you pay tax at the higher rate you can claim further tax relief in your Self Assessment tax return.
- Contact us by post or e-mail (via web site) if you are unsure whether your donations qualify for Gift Aid tax relief.
- Please notify us by post or e-mail (via web site) if you change your name, e-mail or postal address.
- You can cancel this declaration at any time by notifying us by post or e-mail (via web site).

Please send this form to the Membership Secretary