

# APPLICATION FOR MEMBERSHIP of THE WOMEN'S COUNCIL (TWC)

Registered Charity No. 266145



**Annual Subscription: a minimum of £20 : Life membership Subscription: £150**

Please return the completed form (including Gift Aid and Bankers Order sections, if you have completed them) to the Membership Secretary, The Women's Council, 97 Fellows Road, Swiss Cottage, London NW3 3JS

Style / Title ..... Name (Please print) .....

ADDRESS .....

..... Post Code .....

Tel. Landline ..... Mobile..... Email: .....

(please write very clearly).....

I wish to become a Member and enclose my cheque for .£..... for Ordinary Membership (£20 minimum) or £150 for Life membership)

I am willing to accept flyers and other mail by email  [Please tick this box only if you regularly access emails and are willing to print out booking forms, when necessary.]

Signed..... Dated .....

## BANKER'S ORDER

If you can, please help us by making future subscription payments by completing the Bankers Order form below

Name of Bank.....

Branch.....

..... Post Code .....

Bank Sort Code.....

Your Account Number.....

To The Manager – Please pay to The Women's Council  
A/C No. 32913125 at NATWEST Bank plc.  
1 High Street, Weybridge, KT13 8UA.  
Sort code 60-23-34

The sum of £.....(minimum £20) on 1st January next  
and annually every 1st January thereafter.

Signed..... Date.....

Registered Charity No. 266145

*giftaid it*

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 is needed to identify you as a current UK taxpayer. In order to Gift Aid your subscription please complete this Declaration, which you must sign to validate it, and return it to Mrs. Akrawi at the address given on the Application For Membership Form..

I want to Gift Aid my subscription of £..... and any donations I make in the future or have made in the past 4 years to THE WOMEN'S COUNCIL (reg. charity 266145). 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.

Title \_\_\_\_\_ First name or initial(s) \_\_\_\_\_  
Surname \_\_\_\_\_

Full Home address  
.....  
.....

Postcode \_\_\_\_\_

Signed..... Date.....