

HELENSBURGH HEROES

APPLICATION FOR MEMBERSHIP 2018/2019

APPLICANT DETAILS

Title: _____ First Name: _____ Surname: _____

Date of Birth: ____/____/____ Contact Telephone: _____

Contact Email Address: _____

Address: _____

_____ POSTCODE: _____

MEMBERSHIP TYPE (please tick)

Adult £20 Concession £10 Student £5 Young Hero FREE *

Student/Young Hero Application Only

Insert Name of School/College/University where applicant is currently studying

Young Hero Membership Only *Application must be completed by Parent/Guardian

Please enter first name and surname of Parent/Guardian completing form

I confirm as parent/guardian of the young applicant named above that I have given my permission for him/her to become a **Young Hero** member of Helensburgh Heroes.

OPTIONAL - Donation

I wish to make an additional donation to Helensburgh Heroes of

£

Gift Aid. I wish to boost my donation by 25p of Gift Aid for every £1 I donate. I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax in the

HELENSBURGH HEROES

current tax year than the amount of Gift Aid claimed on all my donations it is my responsibility to pay any difference.

PAYMENT (if applicable)

I wish to pay Helensburgh Heroes by CHEQUE BACS No Payment Due

I enclose a Cheque made payable to **HELENSBURGH HEROES** for £

I have made a payment of £ via BACS to:

Account Name: **Helensburgh Heroes**

Account Number: **00400951**

Sort Code: **83 91 46**

Bank: **CAF Bank**

MEMBER COMMUNICATIONS

Helensburgh Heroes would like to keep you updated with latest news, special member offers, events and event pre-sale opportunities from time to time. In order to do so we need your consent.

Yes I am happy to receive member communications from Helensburgh Heroes

We'll keep all your personal details safe and will only use them to administer our Membership Scheme. They will not be used for any other purpose. Helensburgh Heroes is registered with the Information Commissioners Office Data Protection Register Registration Number: ZA153846

APPLICANT or PARENT/GUARDIAN SIGNATURE (if applicant is under 16 years of age)

Signed: _____ Date: _____

Please complete and return this form to:

Member Services
Helensburgh Heroes
28 Sinclair Street
Helensburgh G84 8SU

Helensburgh Heroes is a Charity registered in Scotland: SC040114
Registered Office: 28 Sinclair Street, Helensburgh, G84 8SU