

ARNOLD BENNETT SOCIETY

www.arnoldbennettsociety.org.uk twitter: @BennettSoc UK Registered Charity No 1140053

Membership Application

Subscriptions fall due each 1st September, and run for twelve months.

Name and Title (Mr. Mrs. Miss Ms etc) Block Capitals please:

Name _____ Title _____

Address _____

Post Code. _____

Tel: _____ Email _____

In line with GDPR, members' details on our computer are used solely for administration purposes. No details will be passed on to third parties. By signing this form you consent to the Society holding your records given here and contacting you from time to time regarding future events or to give you information about the Society. You have a right to understand how this information is used and to object if necessary and a right to access and request a copy of information the Society holds for you. Should there be a need to update or correct your records you have a right to do so, and if you wish, for the Society to delete your records.

Single Subscription: £17.50 Joint Subscription: £20.00.

Please add £2 if living overseas. Please add £1 if paying by Paypal. (Payments in sterling.)

Sum enclosed _____ Are you making this payment through your Bank? **YES / NO**

If you are paying by standing order or by a bank transfer, your bank will require the following details

- *Bank Name:* Cooperative Bank Plc
- *Account Name:* Arnold Bennett Society
- *Account Number:* 65263552
- *Sort Code:* 08. 92. 99

If you are paying by cheque or postal order please make it payable to "Arnold Bennett Society"

Payments through PayPal are to: arnoldbennettscty@btinternet.com

You may wish to consider Gift Aiding your subscription. You need to send completed form to:

Fiona Cole, 9 Penelope Close, Harbury, Warwickshire, CV33 9JD

Or Email to arnoldbennettscty@btinternet.com

TO THE ARNOLD BENNETT SOCIETY

I want the Arnold Bennett Society to treat all subscriptions made by me to the Society

as Gift Aid donations until I notify you otherwise.

Please reclaim the tax paid by me. I am a UK taxpayer.

Signature Date

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PLEASE ONLY SIGN THIS FORM IF YOU ARE AGREEING TO GIFT AID.