**Type of Membership**:

Ordinary [ ] Resident in Dunblane and 16 years old or older

Associate [ ] Work in Dunblane and 16 years old or older

Junior [ ] Resident in Dunblane and 12–15 years old

[ ] I agree to pay annual subscription of £20 (£5 for junior member)

[ ] I agree to make a further donation of £……… to support DDT

[ ] I have read and agree to the conditions of membership

**Membership Details:**

Title: \_\_\_\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Family Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**My payment method is: (Please select payment method)**

[ ] I enclose a cheque made payable to “Dunblane Development Trust”

[ ] Bank Transfer: Sort Code 83-18-09 Account Number 00193949

(Please provide membership number or full name as reference )

[ ] Standing Order: Sort code: 83-18-09 Account No: 00193949 (to be paid annually)

(Please provide membership number or full name as reference )

 GIFT AID DECLARATION

DUNBLANE DEVELOPMENT TRUST

* Yes, I want to Gift Aid any subscriptions or donations I make in the future or have made in the past four years to the Dunblane Development Trust. 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.
* The Dunblane Development Trust will reclaim 25p of tax on every £1 you give after 6 April 2011. If you pay Income Tax at the higher or additional rate, you must include all your Gift Aid donations on your Self-Assessment tax return or ask HM Revenue and Customs to adjust your tax code.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_