

MEMBERSHIP APPLICATION FORM
For Washington Village u3a (WVu3a) Charity Reg No. 1179094.

PERSONAL DETAILS (please print)

Title & Full Name:

Known as:

Address:

Post Code

Tel:

Mob:

Email:

Emergency Contact Name & phone number:

N.B. To save costs, the committee and group leaders will use email whenever possible

MEMBERSHIP FEES

Our membership year is **1st April to 31st March** and our annual Membership fee is **£12**. This includes fees to our national organisation (*The Third Age Trust*) which provides a range of services & benefits including liability insurance cover and the *u3a Matters magazine* (sent out five times a year). Associate membership of **£8** is available to fully paid-up members of another u3a. **Associate members must state their main u3a & membership number:** _____

If you are applying from 1st October to 31st March the fee is: £8 (£4 for Associate members).

TERMS AND CONDITIONS OF MEMBERSHIP

All members must:

1. Abide by the Aims and Guiding Principles of the u3a movement.
2. Always act in the best interests of the u3a and never do anything to bring the u3a into disrepute.
3. Abide by the terms and conditions of Washington Village u3a's constitution.
4. Treat fellow members with respect and courtesy at all times.
5. Comply with and support the decisions of the elected committee.
6. Advise the committee of any change in your personal details.

I agree that any photographs of me taken at u3a events may be published on WVu3a's website. Please tick as appropriate: YES NO

I apply for membership of Washington Village u3a and confirm that:

- I will comply with the terms and conditions of membership as stated above
- I have completed the form myself
- I will pay my membership fee either by bank transfer [preferred] or by cash.
Bank Account details: Name: **Washington Village u3a**, sort code **30-99-50**, account no. **30889762**
- In signing this form I agree to have my personal details held on WVu3a's secure database: these are used solely for the purposes of administration and the communication of WVu3a matters.

Signature: _____ Date: _____

Please tick if you are able and willing to Gift Aid your annual membership fee (at no cost to you).

Please indicate overleaf if you are able to help with: leading an activity or short course, giving a talk, administrative support, organising events, ideas for new interest groups.

Please hand this form to the Membership Secretary at the earliest monthly meeting.

Where did you hear about us? (Please tick)

Word of mouth, Search Engine, Website, News, Advert, Social media, Other.