

# Application for Membership

Ashby Canal Association - Reg. Charity 1063566

Please return the form to:

**Cindy Aston, 11 Saxon Court, Leomansley View, Lichfield, Staffs. WS13 8AS** Enquiries: **01543 418748**

Please complete in BLOCK CAPITALS.

Title..... 1st Name..... Surname.....

Title..... 2nd Name..... Surname.....

Address.....

..... Postcode.....

Telephone..... Email .....

I/We wish to apply for the following membership:

*(Please tick appropriate boxes)*

- Single Membership £10.00 per annum
- Family or Joint Membership £13.00 per annum
- Group Membership £20.00 per annum
- Life Membership £100.00

- I/We agree to abide by the rules and constitution of the Ashby Canal Association

Enclosed with this form:

Fee £.....

Donation £.....

**TOTAL** £..... Cheques should be made payable to **Ashby Canal Association**

## Gift Aid Declaration

I want A.C.A. to reclaim tax on this and all future donations until further notice. I pay UK tax equal to the amount which will be reclaimed.

Signed .....

Date .....