



Charity Registration Number: 1114655

MEMBERSHIP APPLICATION FORM

I should like to join South Oxfordshire Choir as a singer.

I should like to pay Monthly by Standing Order/ Annually/ Half-Yearly*

- * I have set up a monthly standing order for £_____ or
* I have set up an internet payment* for £_____ or
* I enclose a cheque for £_____ (payable to South Oxfordshire Choir)

Title**: _____ First Name/Initials**: _____

Surname**: _____

House Name/Number**: _____

Street: _____

City: _____ Post code**: _____

Voice: Soprano/ Alto/ Tenor/ Bass*

Email: _____

Tel: _____

Mobile: _____

*Delete as appropriate ** Required for Gift Aid

GIFT AID DECLARATION (Your subscription is a donation for Gift Aid)
I want to Gift Aid this donation and any I make in the future or have made in the last 4 years. 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.

Signature: _____

Date: _____

Please give this part to the Membership Secretary at the next rehearsal

Please detach the Standing Order Form and send it to your Bank or use the details to set up via Internet Banking

Please detach and send the completed Standing Order Form to your Bank (or set up via internet banking) quoting the 6 digit reference given you by the Membership Secretary.

If in doubt contact membershipsecretary@southoxonchoir.org.

STANDING ORDER FORM

Please pay Lloyds TSB Plc, Market Place, Didcot, OX11 7LQ

Sort Code: 30-99-03
Account No: 00112957
Account Name: South Oxfordshire Choir

A first payment of £_____ (in words _____)
on, or as soon as possible after, (date _____)
and thereafter on the same date each month until further notice
the sum of £_____ (in words _____)

Our Ref: _____
(please request from membershipsecretary@southoxonchoir.org)

Your Bank details:

Name of Bank: _____
Bank full address and post code:

Account to be debited:

Account Name: _____
Bank Sort Code: _____
Account Number: _____

Your signature: _____

Date: _____