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|  |  | **ESU SCOTLAND MEMBERSHIP FORM** |

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| Please fill in the whole form using a ball point pen and return to : English-Speaking Union Scotland, 23 Atholl Crescent, Edinburgh EH3 8HQ | **Scottish Charity No. SCOOO653**SUN 998235 |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Full Name |  |  | Tel. No. |  |
| Home Address |  |  |  |  |
|  |  |  | Mobile |  |
|  |  |  |  |  |
| Post Code |  |  | Email  |  |

|  |  |  |
| --- | --- | --- |
| **TYPE OF MEMBERSHIP** | **Amount** | **Tick below as appropriate** |

|  |  |  |
| --- | --- | --- |
| Adult Membership (cash or cheque) | £30 per year |  |
| Adult Membership (direct debit-see form below ) | £25 per year |  |
| Retired Membership (cash, cheque, direct debit-see form below) | £25 per year |  |
| Family (2 members at the same address) (cash, cheque, direct debit-see form below) | £35 per year |  |

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| **ADDITIONAL DONATION** |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| I/We would like to make an additional donation of : £ |  |  | Date |  |  |  |

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| **GIFT AID** |
| If you are a UK Income or Capital Gains Tax payer in this tax year to an amount at least equal to the tax that ESU Scotland reclaims on your membership and/or additional donation and would like this donation to be treated as UK Gift Aid please complete the declaration below.  |

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| **GIFT AID DECLARATION** |

|  |  |  |
| --- | --- | --- |
| I/We wish my Subscription and/or donation of £ |  | to English-Speaking Union Scotland to be treated as UK gift aid. I/We confirm that I  |
| am a UK Income or Capital gains 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(s) |  |  | Date |  |  |  |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

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| **ENGLISH-SPEAKING UNION SCOTLAND** | **Instruction to your bank or building society to pay by Direct Debit** | direct_debit logo.png |

|  |
| --- |
| Service user number |
| 9 | 9 | 8 | 2 | 3 | 5 |
| Reference |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Instruction to your bank or building society**Please pay English-Speaking Union Scotland direct debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee.I understand that this instruction may remain with English –Speaking Union Scotland and if so, details will be passed electronically to my bank/building society. |
| **Signature(s)** |
| **Date** |

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| Please fill in the whole form using a ball point pen and send to :**ESU Scotland; 23 Atholl Crescent; Edinburgh EH3 8HQ** |
|  **Name and Postal address of your bank or building society** |
| **To : The Manager Bank/building society** |
| **Address** |
|   **Postcode** |
| **Name(s) of account holder(s)** |
|  |
| **Bank/building society account number** |
|  |  |  |  |  |  |  |  |
| **Branch sort code** |
|  |  |  |  |  |  |

