## Please print this form double sided if possible

## NEW MEMBER APPLICATION FORM APR 24-MAR 25

## \*\*\*\*\* ONLY USE TO JOIN READING, BERKSHIRE u3a \*\*\*\*\*

Please read carefully and complete **BOTH** pages using **CAPITAL LETTERS**. Subscription details are shown overleaf.

Membership Secretary:

Julia Rahman

163 Wensley Road Reading Berkshire RG1 6DU

Email: membership@readingu3a.org.uk Web: www.readingu3a.org.uk



Title:		Surname:			
Forenames:					
Address:					
				Postcode:	
Mobile:			Landline:		
Email:					
THIS SECTION IS OPTIONAL. Please mark as appropriate					
AGE	Up to 59	60-69	70-79	80+	Prefer not to say

**CONDITIONS OF MEMBERSHIP** The Principles of the u3a movement, our Constitution and Policies are available on our website.

All members must:

- Be aware that they should have the appropriate ability to take part in any activity of their chosen group
- Advise the Membership Secretary of any change in their personal details
- Abide by the Principles of the u3a movement
- Abide by the terms and conditions of our constitution
- Abide by our policies.

**PRIVACY STATEMENT** Our full Privacy Policy is available on our website. The information you provide on this form will be stored securely on paper and/or computer and used for membership purposes as follows:

- To communicate with you as a u3a member
- To share with the Committee and group leaders for those groups of which you are a member
- To send you general information about the Third Age Trust (the national organisation to which u3as are affiliated)
- To supply names and addresses ONLY to carefully selected outside companies for the distribution of our newsletter and the Third Age Trust magazine, Third Age Matters
- To meet any legal or insurance requirements.

By applying for membership of Reading u3a, I agree to the Conditions of Membership stated above, and I also agree to the information I have provided on this form being used for the purposes stated.

Date	Signature	(Digital signature accepted)
THIS FORM MUST BE	E RETURNED TO THE MEMBERSHIP SECRETA	<b>ARY IN ORDER TO PROCESS YOUR APPLICATION</b>

\*\* ONLY USE TO JOIN READING BERKSHIRE u3a. Otherwise please search for your local u3a online \*\*

Our membership year starts on April 1st and ends on March 31st the following year.

Please indicate  $\underline{ONE}$  of the options below with an 'X' to reflect your application date.

I am joining between March & September and will receive my newsletters by email - £35		
I am joining between March & September and will receive my newsletters by post - £43		
I am joining between October & February and will receive my newsletters by email - £17.50		
I am joining between October & February and will receive my newsletters by post - £21.50		

P	A	Υ	M	EI	NΤ	by:	•
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PAYMENT by:				
CHEQUE payable to 'U3A READING' and sent with this form to the Membership Secretary, details overleaf.				
	Overlear.  Post my card to me. I enclose a small STAMPED self-addressed envelope, or			
☐ I will collect my card from a Guest Speaker/Members m	-			
BANK TRANSFER Bank: LLOYDS Sort Code: 30 96 96 Acc READING' (Business Account) Reference for payment: You	r first name and surname.			
DATE PAYMENT MADE:	PLEASE DO NOT MAKE ANY TRANSFERS BEFORE 1st APRIL 2024			
☐ I will collect my card from a Guest Speaker/Members m	eeting or D Email JPG of card			
Reading u3a is run by its members for its members	1			
Please provide details below of any skills or experience you c				
(e.g. committee/financial/marketing/promotional/website)	an one.			
3.1				
GIFT AID				
<u>ONLY</u> complete this section if you wish to Gift Aid your s	ubscription.			
* <b>Note</b> You can only gift aid your <u>own</u> subscription not your spougift aid declaration (i.e. on a separate membership form) if they a				
You must notify the Membership Secretary (details overleaf) if: -your name or address, or no longer pay sufficient tax on your inco	,			
Gift Aid Declaration				
$\square$ <b>X in this box if you want to Gift Aid your subscription</b> $\&$ any s	subscriptions made in the future to Reading u3a.			
I am a UK taxpayer and understand that if I pay less Income Tax a Aid claimed on all my donations in any tax year it is my responsib	•			
Date Name (PRINT)				
Signature	(Digital signature accepted)			
Please ensure that if you have signed this section, you have also marked X above.				