# Friends of Arnos Vale Cemetery

The Queen's Award for Voluntary Service

## Application for membership/renewal of membership for the year commencing 1st January 2018

**Email: friends@arnosvale.org.uk**

Name…….. (Mr/Mrs/Miss/Ms/Other)

Address……

……Postcode……..

*Do you have an email address? If so, please help us save money on postage - it would be a great help if we can send you newsletters and any other correspondence by email. If you are happy for us to do this please also add your email address below. If not, we will contact you by post. We will not share your details with anyone outside of Arnos Vale Cemetery Trust.*

**E-mail**

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Telephone……

**Annual UK Membership** – please tick

| **Min £5** | **£10** | **£15** | **£20** | **Other** |
|---|---|---|---|---|
| | | | | |

**Overseas Membership** – please tick

| **Min £10** | **£15** | **£20** | **Other** |
|---|---|---|---|
| | | | |

Please return this form and your subscription to:

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**Friends of Arnos Vale Cemetery, Membership Secretary, West Lodge, Arnos Vale Cemetery, Bath Road, Bristol BS4 3EW**

Cheques/POs payable to **'Friends of Arnos Vale Cemetery'** (UK Sterling only please)

☐ (Please tick) Make your subscription or donation worth 25% more at no extra cost to you

The Friends of Arnos Vale can claim Gift Aid on your subscriptions. If you are a UK taxpayer, you can make every £1 you give worth 25p more at no cost to you just by agreeing to us claiming back the tax on your gift. So please tick the Gift Aid box above.

I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax in the current tax year than the amount of Gift Aid claimed on all my donations it is my responsibility to pay any difference.

If you pay Income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your Self-Assessment tax return or ask HM Revenue and Customs to adjust your tax code.

**Signature**: …… **Date**……

| For admin use : | Records updated: |
|---|---|
| Date form received: | |