

**Dorking Museum Membership**

Please complete & return to:

Dorking Museum, Membership Officer, The Old Foundry, 62 West Street, Dorking, RH4 1BS  
 admin@dorkingmuseum.org.uk



Please complete in block capitals:

|                                      |          |
|--------------------------------------|----------|
| Title                                | Name     |
| Title                                | Name     |
| Name and Date of Birth of child(ren) |          |
| Company Name                         |          |
| Address                              |          |
| County                               | Postcode |
| Tel                                  |          |
| Email                                |          |

Please circle category of membership

- Individual Membership** £14  
One person, non transferable
- Joint** £18  
Suitable for two members at the same address sharing mailings.  
Please give both names
- Family** £20  
Includes two adults plus children. Please provide names and ages of children
- Student (in full time education)** £7.50
- Corporate** £250  
Suitable for all businesses
- School** £30  
Suitable for all schools and nurseries

**PAYMENT**

Would you like to make a donation? No / Yes  
 How much would you like to donate? £

TOTAL payment \_\_\_\_\_

Please tick payment method:

- Standing Order** saves money on administration and allows us to spend more protecting local heritage.
- Cheque** payable to 'Dorking Museum'. Reminders are sent out at annual renewal.
- Cash.** Reminders are sent out at annual renewal

Signature(s) .....

Date .....

**Dorking Museum is a division of the Dorking Society. The DS is a charitable company limited by guarantee registered in England and Wales. Company No. 5126366. Charity No. 1107459. www.dorkingmuseum.org.uk**

**GIFT AID DECLARATION - for past, present & future donations**

Please treat as Gift Aid donations (including subscriptions) all qualifying gifts of money made by myself today, in the past 4 years and in the future.

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. I understand the charity will reclaim 25p of tax on every £1.



Full Name

Address

Signature .....

Date .....

**Thank you for supporting us. Please note:**

- Payments from company accounts and gift subscriptions are not valid for Gift Aid.
- If your circumstances change and you no longer pay sufficient tax, you should cancel your declaration by letting us know in writing.
- Please notify us of any changes in your name or address whilst this declaration is in force.
- 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.

**Data Protection Statement:**

The information you give when completing this form will be used in accordance with the EU General Data Protection Regulation. We will only ever collect information that we need and hold your information only as long as necessary for the purpose for which it was collected. Please see our privacy policy (<https://dorkingmuseum.org.uk/privacy-notice/>) for more details on how we use personal data and information.

## Bank Standing Order

Please complete this form and return to:  
Treasurer, Dorking Museum, The Old Foundry, 62 West Street, Dorking, RH4 1BS

Full name and address of your bank, your sort code and bank account number:

To: ..... Bank/Building Society

Branch: .....

Address: .....

.....

.....

Postcode.....

Sort code:

|  |  |  |  |  |  |
|--|--|--|--|--|--|
|  |  |  |  |  |  |
|--|--|--|--|--|--|

Bank account number:

|  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|

On the .....[Date] and thereafter on the same date every year until further notice, please pay for the credit of **Dorking Museum**:

HSBC Bank  
67 West Street, Dorking, RH4 1BW

Sort code:

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 4 | 0 | 1 | 9 | 2 | 2 |
|---|---|---|---|---|---|

Bank account number:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| 6 | 1 | 4 | 6 | 3 | 8 | 4 | 5 |
|---|---|---|---|---|---|---|---|

The sum of £                      With reference (your surname) .....

This instruction cancels any previous order in favour of the beneficiary.

Signature(s) .....

Print name(s) .....

Date .....