Aberdeen Choral Society

Scottish Charity No SCO05414

Membership

Name - As to Appear in Programme:					
Full Home Address:					
Post Code:					
E-mail Address: Please print CLEARLY					
Telephone:					
Section in Choir: <i>please</i> ✓					
1st Soprano 2nd Soprano 1st Al	to 2nd Alto 1	lst Tenor	2nd Tenor	1st Bass	2nd Bass
Are you under 21 Years of Ag	ge or in Full T	Гime Ed	ucation: pi	lease 🗸	
Do you require a receipt from	n the Treasu	rer: <i>ple</i>	ease	✓	
Have you sung with Aberdee	n Choral bef	ore: plea	ase 🗸		
What is your occupation? (op	otional)				
Do you have any additional s Choral Society?	kills or expe	rience tl	hat might l	be usefu	l to the
I consent to Aberdeen Choral	Society hold	ding the	above dat	a	
Signed	Dat	te:	/		/
If you have not already comp	leted a Gift A	Aid Decla	aration and	d vou pav	income t

If you have not already completed a Gift Aid Declaration and you pay income tax or capital gains tax, please consider completing the adjacent section of this Form. This will enable us to increase the value of your membership subscription to the Society by reclaiming tax you have already paid.

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Gift Aid Declaration

Title: First Name:	
Surname:	
Full Home Address:	
Post Code: _	
	id donations all qualifying gifts of money that I make rom the date of this declaration until further notice.
	stand that if I pay less Income Tax and/or Capital ft Aid claimed on all my donations in that tax year it lifference.
Signed	Date: //
Notes 1) As your declaration cov Society:	vers donations you may make in the future, please notify th
• if you want to cano	el this declaration:

if you change your name or home address while the declaration is still in force;

if you no longer pay sufficient tax on your income and/or capital gains.

If you pay 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.

August 2017