



**Step 1 - Your Details**

<b>Title</b>	<b>First Name</b>	<b>Last Name</b> (for joint membership please state names of both adults)	<b>Date of Birth</b>
<b>Adult 1:</b>	_____	_____	_____
<b>Adult 2:</b>	_____	_____	_____
<b>Address:</b>	_____		_____
			<b>Postcode:</b> _____
<b>Telephone Number:</b>	_____		<b>Email address:</b> _____

I am happy to be contacted by my local Wildlife Trust about conservation, membership, fundraising and other activities by:

Post  email  e-newsletters  telephone

You can change your contact preferences at any time by contacting the Wildlife Trust by telephone or email

<b>Step 2- Please Choose A Membership Category</b>		<b>Monthly by Direct Debit</b>	<b>Annually by Direct Debit</b>
<b>Individual</b>	<b>(minimum £2.50 per month)</b>	£	£
<b>Joint</b>	<b>(minimum £3 per month)</b>	£	£
<b>Family</b>	<b>(minimum £4 per month)</b>	£	£
<b>School</b>		N/A	£100
<b>Watch (age 8 – 14yrs)</b>		N/A	£15.00

<b>Name of Children under 18 for Family/Watch membership</b>	<b>First Name</b>	<b>Last Name</b>	<b>Date of Birth</b>
<b>Child 1:</b>	_____	_____	_____
<b>Child 2:</b>	_____	_____	_____

**Step 3 – Charity Giftaid Declaration-boost your donation by 25p for every £1 you donate**

*giftaid it*

Giftaid is reclaimed by the charity from the tax you pay for the current year  
 Yes, I'd like to Giftaid my donations and any donations I make in future or have made in the last four years to the Wildlife Trust of South and West Wales. I am a UK tax payer and understand that if I pay less income and/or capital gains tax in each year than the amount of Giftaid claimed by all charities and community amateur sports clubs on my donations in that tax year, it is my responsibility to pay any difference. I agree to notify the charity if I no longer pay sufficient tax, want to cancel this declaration or if I change my name or address.

**Signature:** ..... **Date:** .....

**Step 4 - Please Select Payment Method - Please consider paying by Direct Debit as it costs us less to administer**

**Cheque** - I would like to pay the membership in full and enclose a cheque for the sum of £ \_\_\_\_\_ made payable to WTSWW

**Credit Card** - Please supply the following Credit Card Details

Card Number:                      Security Number:

Issue No. (debit cards):  Valid From:   /   Expiry Date:   /

Cardholders Name:  Cardholders Address:  (if different from members)

**Direct Debit** Please fill in the Direct Debit Mandate below

**Instruction to your Bank/Building Society to pay by Direct Debit**

Originator's ID number: 

9	8	2	0	9	7
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 The Wildlife Trust of South and West Wales  
 Fountain Road, Tondu, Bridgend, CF32 0EH



**Name and full postal address of your Bank or Building Society (Block capitals please)**

**Name:** To: The Manager of \_\_\_\_\_

**Address:** \_\_\_\_\_

**Postcode:** \_\_\_\_\_

**Name(s) of Account Holder(s):** \_\_\_\_\_

**Branch Sort Code:**       **Bank/ Building Society Account Number:**

**Reference Number (Wildlife Trust of South and West Wales use only)**

**Instruction to Bank or Building Society**  
 Please pay The Wildlife Trust of South and West Wales Ltd 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 The Wildlife Trust of South and West Wales Ltd and, if so, details will be passed electronically to my Bank/Building Society.

**Signature:** ..... **Date:** .....