

Membership Form

1. Your Details: Please print clearly

First Name: _____ Surname: _____

E-mail: _____

Address: _____

_____ Post Code: _____

Date of Birth: _____ Phone: _____

2. Your Areas of Interest: *(please circle any areas you have an interest in)*

Acting Directing Stage Management Costume

Lighting Sound Producing Set Design

Set Build Props Hair & Makeup

Please note that all members are expected to volunteer to help with Front of House support for our productions a minimum of twice a year.

3. Payment Options:

Direct Debit:

Go to <http://bit.ly/2qXmO6L> . This link will take you to a 3rd party provider we partner with to allow us to take Direct Debit payments.

To pay by this option, please make payment within 30 days and tick here:

Cash, Cheque or Credit Card:

You can call up or drop into the Putney Arts Theatre box office to make payment.

You can call us on **020 8788 6943**.

To pay by this option, please make payment within 30 days and tick here:

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4. Gift Aid:

Through GIFT AID, we are able to receive the benefit of an additional amount via the tax we can claim back. For example, individual full membership costs £20. If we claim back the tax, it is worth £25 to us. This is a considerable increase to us at no extra cost to you.

Donor Declaration:

I want to Gift Aid my current donation and any donations I may make in the future or have made in the past 4 years to (Name of Charity).

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.

If you wish to allow us to claim GIFT AID on your subscription, please tick here:

5. Membership Records

We will hold your details on our secure membership database and mailing list, which we use to send membership notices and other communications, including information about events at Putney Arts Theatre. We will not disclose your details to any third parties. If you wish your details to be removed from our mailing list at any time please write to us at the address above or email us at info@putneyartstheatre.org.uk

6. Submit Your Membership Form:

Please sign below and return to:

PAT Membership.
Putney Arts Theatre. Ravenna Road. Putney. London. SW15 6AW

Print Name: _____

Signed: _____

Date: _____

For Office use only:

Membership No:

Date:

Amount:

Method:

Entered: