

**THE BENSINGTON SOCIETY – MEMBERSHIP APPLICATION FORM 2024**  
(Membership Year is from 1 Jan to 31 Dec)

**This form need only be completed in full by NEW members or by existing members to notify us of a CHANGE to their personal details or CHANGE to their tax status for Gift Aid purposes**

There are no restrictions on the numbers joining and a single form showing all first names and surnames can be used for a family or joint application. Please return this form by email to: [bensingtonsociety@gmail.com](mailto:bensingtonsociety@gmail.com)

Please pay by bank transfer to: Account: **Bensington Society**, Account No: **21633260**, Sort Code: **30-99-03** and Reference “**Mship + (Name)**”. If you prefer to pay by cheque or cash please contact us at above email address.

Title(1):                      Initials:                      First Name:                      Surname:

Title(2):                      Initials:                      First Name:                      Surname:

Address:

Postcode:

Email Address (1):

Home Tel No:

Email Address (2):

Mobile No 1:  
Mobile No 2:

**Membership Fee is £12 per person for annual membership or £120 per person for life membership**

I have made a bank transfer payment of £                      to: ‘**Bensington Society**’, Acct No: **21633260**, Sort Code: **30-99-03**  
Reference: **Mship + (Name)**

**OR (Delete as necessary)**

I enclose a cheque/cash for                      persons for total of £                      made out to ‘**Bensington Society**’

**GDPR**

***I agree to the statements below.***

- *I agree to the Bensington Society holding the above personal information for the management of the Society.*
- *I understand I may request the removal of my personal information by contacting the Membership Secretary.*
- *I am content that the Society should send me information about the Society activities.*
- *I understand that the Society will normally contact me by email or phone unless I have notified the Membership Secretary that I prefer another method*
- *I understand I may change my preferences by contacting the Membership Secretary.*

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Failure to complete the declaration may result in your membership application being delayed or refused.

You may read the Society’s Privacy Policy on our website at [www.bensington-society.com](http://www.bensington-society.com) or, alternatively, request a copy by email or post from the Membership Secretary at: [bensingtonsociety@gmail.com](mailto:bensingtonsociety@gmail.com)

**GIFT AID**

**ONLY REQUIRED FOR INITIAL MEMBERSHIP APPLICATION**

**Should you wish to Gift Aid your subscription, please complete the form and sign below:**

Title:                      Initials:                      First Name:                      Surname:

House Name or Number:

PostCode:

I wish to Gift Aid my/our individual or family membership subscription(s) of £                      and any membership subscriptions I make in the future or have made in the past 4 years to: **Bensington Society**. I am a UK taxpayer.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

**Please notify the Membership Secretary should you wish to cancel this declaration**