

Paget's Membership Application

Please complete and return this form to the Paget's Association, Suite 5, Moorfield House, Moorside Rd, Swinton, Manchester, M27 0EW.

As a member of the Paget's Association I understand I will receive the quarterly Paget's newsletter by post

You may also wish to receive event invitations, details of fundraising activities and updates on research into Paget's disease. Please indicate below how you would like us to communicate this information with you.

Post

Yes I am happy to receive information by post

No I do not want information posted to me

Email

Yes I am happy to receive information by email

No I do not want information emailing to me

Telephone

Yes I am happy to be contacted by telephone

No I do not want to be contacted by telephone

Mr/Mrs/Miss/Ms/Dr/Rev/Other.....

Surname

Forename(s)

Address

.....

.....Postcode

Date of Birth.....

Email Address

I have Paget's disease

I am a Health Professional

I am a friend/relative of someone with Paget's disease

I have an interest in Paget's disease

None of the above / I prefer not to say

How did you hear about the Paget's Association?

Please tick which kind of membership you would like

£15 – UK Annual Membership

£150 - UK Lifetime Membership

£20 - Overseas Annual Membership

Please tick your preferred method of payment

Cheque payable to 'Paget's Association'
I enclose my membership payment of £_____
I wish to make a donation of £_____
I enclose a cheque to the value of £_____

Standing Order please complete the section below.

Standing Order Mandate

My Bank is

Bank Address

.....

.....Post Code.....

Pay to the credit of the Paget's Association, Barclays Bank, 1 Market St, Bolton, BL1 1XA
Account No 30660078 Sort Code 20-10-71

The sum of £..... on (Date of 1st payment)

From my/our account (name).....

My Account No is.....

My Sort Code is.....

Please make similar payments **annually** on the same date until further notice.

Signed.....Date.....

Gift Aid Declaration

In order to Gift Aid your donation you must tick this box

I want to Gift Aid my membership/donation of £_____
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.

Signed _____ Date _____