

South Staffordshire & District BKA



Membership Application Form 2018

Member No: Member No:

Main Applicant		Membership Type	
Title	Family Name	First Name(s)	Initials
Address 1			
Address 2			
Town			
County			
Post Code			
Email			
Telephone		Mobile	

Partner Member Required Please select an option

Please Note: Partner members MUST be living at the same address as a REGISTERED MEMBER.

Partner Member Details

Title	Family Name	First Name	Initials
Email Address			
Telephone		Mobile	

Fees

Main Member	Fee	<input type="text"/>
Partner Member	Fee	<input type="text"/>

Additional BDI: Please read the information sheet before completing this section.

No of Colonies to be insured	<input type="text"/>	Fee	<input type="text"/>
TOTAL Remittance:			<input type="text"/>
Signature of Main Applicant		Date	
<input type="text"/>		<input type="text"/>	

The Subscription is valid for one year from 1st of January 2018

Payment method:

Bank Details:

Cash	<input type="text"/>	Ac Name: South Staffordshire & District Beekeepers Association
Cheque	<input type="text"/>	Ac Number: 00095894 Sort Code: 40 52 40 Bank: CAF Bank Ltd
Electronic Transfer	<input type="text"/>	Please Make cheques Payable to: "SS&DBKA"

DATA PROTECTION STATEMENT

PLEASE SELECT: I wish my name or contact details to be circulated to other members

Please Return the completed form to:

Peter Ward, 4, Merridale Grove, Wolverhampton, West Midlands, WV3 9LH. Email: peter@thewardsite.com

"ptwibill SSDBKA subs.xlsx"

Gift Aid Declaration

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. Gift Aid allows us to reclaim 25p of tax on every £1 that I give

I agree

For your protection in the event of a notifiable pest or disease being found in this area we will disclose your details to the Bee Inspectors.

I am for my details to be disclosed to th Bee Inspectors