

Lord Carlisle Heritage Trail Campaign

Membership Subscription Form

Thank you for supporting the Campaign for the Lord Carlisle Heritage Trail. Please complete this form to become a member and support the preservation and promotion of the Lord Carlisle Heritage Trail.

1. Member Details

Club/Charity/Association					
Title (Mr Mrs, Ms, Miss, Dr etc.)					
First Name(s)					
Surname					
Address					
Town		County		Postcode	
Email					
Telephone					

2. Membership Subscription

Annual Membership Fee £5 due annually 1st April–31st March: £ _____ :

Payment Method (<i>please tick</i>)	Bank Transfer	<input type="checkbox"/>	Standing Order	<input type="checkbox"/>	Cheque	<input type="checkbox"/>	Cash	<input type="checkbox"/>
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Date Paid	
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Standing order is attached for your convenience.

Bank ref used	
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Bank Reference: Please enter your surname and initial for the Bank Transfer as a reference

Cheques payable to: **Lord Carlisle Heritage Trail**

Bank details

Bank Name: Lord Carlisle Railway (LCHT)

Account number: 10284908

Sort code: 82-12-08

Please return cheques to the address below.

3. GDPR & Privacy Consent

The Campaign for the Lord Carlisle Heritage Trail will store and process your personal data for the purpose of administering your membership and communicating with you about the campaign, events, fundraising activities, and related heritage initiatives.

Your data will be stored securely and will not be shared with third parties without your consent unless required by law.

Please tick to confirm:

- I consent to the charity storing and processing my personal data for membership administration.
- I am happy to receive updates about the campaign, events, and activities by email.

Signature		Date	
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4. Gift Aid Declaration (UK Taxpayers)

Boost your donation by 25p of Gift Aid for every £1 you donate.

Gift Aid is reclaimed by the charity from the tax you pay for the current tax year. Your address is needed to identify you as a current UK taxpayer.

I want to Gift Aid my membership subscription and any donations I make in the future or have made in the past 4 years to the Campaign for the Lord Carlisle Heritage Trail.

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.

Title (Mr Mrs, Ms, Miss, Dr etc.)					
First Name(s) in Full					
Surname					
Address					
Town		County		Postcode	
Email					
Telephone					
Amount Donated/subscription	£				

Please tick box to confirm you are over 18

Signature		Date	
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Please notify us if you:

- Want to cancel this declaration
- Change your name or home address
- No longer pay sufficient tax on your income and/or capital gains

5. Return Completed Form

Please return the completed form to:

Campaign for the Lord Carlisle Heritage Trail
The Hub, Hallbankgate

You may email a copy of the completed form to:

contact@lchtrail.org

*Thank you for supporting the **Lord Carlisle Heritage Trail.***

STANDING ORDER MANDATE

Support the Campaign for the Lord Carlisle Heritage Trail

Please complete this form and return it to your bank or building society.

1. Your Details

Title (Mr Mrs, Ms, Miss, Dr etc.)	
First Name(s)	
Surname	
Address	
Postcode	
Email (optional)	
Telephone (optional)	

2. Your Bank Details

Name of Bank / Building Society	
Bank Address	
Account Name	
Account Number	
Sort Code	

3. Payment Details

Please pay the following amount	£
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Payment frequency (tick one):

<input type="checkbox"/>	Monthly
<input type="checkbox"/>	Quarterly
<input type="checkbox"/>	Annually

Start date	/	/
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<input type="checkbox"/>	Until further notice
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<input type="checkbox"/>	OR until (date)	/	/
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4. Payment Recipient

Please pay to:

Account Name: **Lord Carlisle Heritage Trail (LCHT) or Campaign for the Lord Carlisle Heritage Trail**

Sort Code: 82-12-08 (Virgin Money)

Account Number : 10284908

Reference (please include your surname and initial)	
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5. Authorisation

I instruct my bank/building society to pay the standing order detailed above and debit my account accordingly.

Signature		Date	
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