



**BRISTOL Branch Membership 2021-2**

Please PRINT your details, complete all requested options, and sign at end of the form.

Please return completed forms, with payment, where appropriate, to Val Giltrow-Tyler at a branch meeting, post to 2 Cromwell's Hide, Stapleton, BS16 1TA, or as a scanned copy to [vgt1satbg@gmail.com](mailto:vgt1satbg@gmail.com)

<b>Name:</b>		<b>Title:</b>	
<b>Address:</b>	Post Code:		
<b>Email:</b>			
<b>Telephone:</b>			

	Tick		Tick
I am already a member of this branch		I am a new member	
I am a member of another branch		Which branch?	

(HQ Data-Base Code)	Please tick membership type			Subscriptions		Donations		The subscription may be halved for new members who join after 1 January 2022.
	↓			SRP	Branch			
F		Full	(Individual)	£25.00	£10	National Youth Recorder Orchestra	£	<b>YOUR TOTAL PAYMENT</b> ↓
H		Household	(First member pays)	£37.50	£17.50	Walter Bergmann Fund	£	
A		Associate	(Member of another branch)	-----	£10	SRP Central	£	
S		Youth *	(under 30)	£10.00	£10	SRP Branch	£	
S		Student *	(in full time education)	£10.00	-----			
* I am under 30 or * I am a student in full time education at:			<b>Total of Central and Branch subs</b>	£	£	<b>Add Donations here</b>	£	£

<b>PAYMENT</b>				Tick
I attach a cheque payable to SRP Bristol (or as cash, if in person)				
<b>OR:</b> I have paid by BACS to	Sort Code: 09-01-54	Account number: 78451083	Reference: (eg your surname) [ ]	

<b>GIFT AID</b>		<b>Please tick relevant box</b>	Database Code
I wish my subscriptions and any donations in the current membership year to be treated as Gift Aid donations. (Please make sure details on the declaration match your membership record and tick one of the options below)			
I have previously completed a Gift Aid declaration, which is still valid			Y
I am providing a completed Gift Aid declaration now			P

<b>PRINTED MEMBERSHIP LIST</b> Please complete carefully and sign below if you would like your details to appear in the printed membership list. If incomplete or unsigned, your name will NOT be included	<b>Tick for yes</b>
I give my consent for my name to be included in the printed membership list that is sent to all SRP members.	
In addition I give my consent for the following information to be included:	
My address	
My telephone number	
My e-mail details	
I would like to be listed as interested in consort playing	
I would like to be shown as a teacher of the recorder	Qualifications:

Signature.....Date.....

**Data Protection Notice:** The Society will hold members' personal details in accordance with the General Data Protection Regulations. The data will be used to process your membership nationally and by your Branch. It will not be passed to any third party without your consent. For more information please see our Privacy Policy at <https://www.srp.org.uk/documents/rules/privacy-policy.pdf>