

## Calderdale Industrial Museum Association Application for Membership

I / we would like to apply for membership of CIMA. I / we agree to be bound by all the provisions of the Bye Laws and the Articles of Association of CIMA.

	First Applicant S	econd Applicant
Title:		
First Name:		
Surname:		
Address:		
Post Code:		
Home Number:		
Mobile Number:		
E-Mail Address:		
Date of Birth (if o	ver 16 & under 25):	
Joint	Membership subscription for the calendar year:- Membership (2 people at the same address) for tent membership (over 16 & under 25) for the cale	-
I/we enclose/trans	fer my/our membership subscription of:-	£
I/we also enclose/	transfer a donation to the Association's fund	
Total amount enclo	osed/transferred:-	£
<b>56915860</b> and quote	n-line if at all possible, so please transfer your payme your surname and initials as a reference. If you p e Industrial Museum Association" and enclose it witl	refer to pay by cheque, please make it
to process and manag	our privacy is important to us so we keep your data se your membership of CIMA and to deliver your mone else without your express consent unless we are	ember benefits. We will not share your
-	ivacy Statement and I/we agree that to the best of n shes as a member CIMA	ny/our knowledge that it is accurate and
Signed:		
	Date:	
Gift Aid		
As a charity, the Assoc	iation is able to reclaim tax at a rate of 25% if this dec	aration is completed by either applicant
and in the future. I am	ibscriptions I pay or donations I make to the Calderdale a UK taxpayer and understand that if I pay less Income med in any tax year then it is my responsibility to pay the	Tax and/or Capital Gains Tax than the
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Please send this form to:- Calderdale Industrial Museum, Square Road, Halifax, HX1 1QG