

Affiliated to the British Heart Foundation

Registered Charity No: 1132434

www.throbrehab.org.uk

## Application for Membership and Gift Aid Declaration (please use BLOCK Capitals)

Title:	First Name(s):		Surname:	
Home Address				
Postcode:	Telephone	ə:		
Email:				
THROB's own		THROB will no	ontact details being held on compute pass my details on to any third party	-
		ļ	*enclose my annual subscription of ${f f}$	10.00
	And woul	ld like to add a	urther donation to THROB funds of <b>£</b>	
			Total £	
	nabilitation Organisation of Bei		k Transfer or Standing Order to our Rl r 10838554, sort code 16-24-48.	BS account:
	Boost your subscription/dona		f Gift Aid for every £1 you donate x you pay for the current tax year.	
I am a UK tax	I want to Gift Aid my donati made in the past 4 years. payer and understand that if I	ion to THROB  pay less Incon	o eligible) you must tick the box bel and any donations I make in the futu ne Tax and/or Capital Gains Tax than s my responsibility to pay any differe	re or have the amount
Date		Sig	nature:	
Please notify T sufficient tax or	HROB if you: want to cancel this a your income and/or capital gain	declaration, cha	nge your name or home address, or no lo	onger pay
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Membership Secretary: David Grant, 6 Chandler's Quay, Ray Mead Road, Maidenhead, SL6 8NJ