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Membership Application Form

Please complete fully and return, with your subscription if appropriate, to:
Covent Garden Area Trust, 13 New Row, Covent Garden, London WC2N 4LF

1. Personal Details:

Title: Name: Surname:

Address:

City/County: Postcode:

Email:

2. Membership Type

Full membership (if you live, or work or are interested in Covent Garden)

☐	Resident – within the WC2 postcode area (£3.00)	£……
☐	Resident life member – as above (£30.00)	£……
☐	Non-resident (£5.00)	£……
☐	Non-resident life member (£50.00)	£……
☐	FREE senior citizen membership (resident only)	Date of birth ……
☐	Business/Corporate membership* (£30.00)	£……
☐	Donation	£……

Total £

Payment method: ☐ Cash ☐ Cheque ☐ CAF voucher
☐ Internet banking (Sort code: 30-92-32, Account number: 0480900)

Please make cheques payable to "Covent Garden Area Trust".

*** Please write on the reverse of this form your reasons for wishing to be a member of the Trust to assist the Trustees in deciding whether or not to accept your application. Applications will be considered in the order they are received at the next available Council meeting.**

☐ Please tick this box if you wish to Gift Aid your individual subscription and/or donation and to confirm that you are a UK taxpayer.

By signing and returning this form you confirm your details and agree to the Covent Garden Area Trust holding your details on our computer; these will not be disclosed to third parties.

NAME (if Business/Corporate representative):

Signature: Date:

* Business or Corporate membership to be completed and signed by an authorised representative.