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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | Membership Application Form  2020 | | | | | | | | | | | | | | | |
| Office Use only: Membership number……………………………………………….  Please use capital letters and write clearly in black ballpoint pen.  If you have completed the Direct Debit Form, detach and keep the Direct Debit Guarantee. and send the completed form and Direct Debit Instruction to *The Membership Team*, *Harewood House, Harewood, Leeds, LS17 9LG* | | | | | | | | | | | | | | | | | | | | | | |
| **Main member** (This is the person paying for the membership unless a gift, see below) | | | | | | | | | | | | | | | | | | | | | | |
| Title | | | | | First Name | | | | | | | Surname | | | | | | | | | | |
| Home Address | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | Postcode | | |  | | | | | | |
| Contact Telephone | | | |  | | | | | | | | Email | | | | | | | | | | |
| **Second named adult** (If applicable) | | | | | | | | | | | | | | | | | | | | | | |
| Title | | | | | First Name | | | | | | | Surname | | | | | | | | | | |
| **Names of children and dates of birth** | | | | | | | | | | | | | | | | | | | | | | |
|  | First Name | | | | | | | Surname | | | Day | | | Month | | | | | | | Year | |
| Child 1 |  | | | | | | |  | | |  | | |  | | | | | | |  | |
| Child 2 |  | | | | | | |  | | |  | | |  | | | | | | |  | |
| Child 3 |  | | | | | | |  | | |  | | |  | | | | | | |  | |
| Child 4 |  | | | | | | |  | | |  | | |  | | | | | | |  | |
| Child 5 |  | | | | | | |  | | |  | | |  | | | | | | |  | |
| **If you are purchasing this membership as a gift, please enter your details below:** | | | | | | | | | | | | | | | | | | | | | | |
| Title | | | | | First Name | | | | | | | Surname | | | | | | | | | | |
| Address | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | Postcode | | | |
| Contact Telephone | | | | | | | | | | | | Email | | | | | | | | | | |
| Type of Membership | | | | | | Non-Direct Debit Price | | | | Annual Direct Debit Price | | | | | Quantity | | | | | | | Annual cost |
| Individual | | | | | | £50 | | | | £40 | | | | |  | | | | | | |  |
| Couple *(living at the same address)* | | | | | | £95 | | | | £75 | | | | |  | | | | | | |  |
| Family  *(2 adults living at the same*  *address with 5 children  or grandchildren)* | | | | | | £120 | | | | £95 | | | | |  | | | | | | |  |
| Additional child | | | | | | £20.00 | | | | £17.50 | | | | |  | | | | | | |  |
| **GIFT AID DECLARATION**: Harewood House Trust is an educational charitable trust set up to maintain and develop Harewood, its  collections and grounds for the public benefit. If you are a UK tax payer, Gift Aid enables charities to reclaim 25p for every £1 you give  which will make a significant financial contribution to the work of the Trust. **All you need to do is read the declaration below, tick the  box if you are eligible and date the form.** | | | | | | | | | | | | | | | | | | | | | | |
|  | | **I would like Harewood House Trust to reclaim the tax on any eligible donations or membership subscriptions that I have  already made or will make until further notice.** | | | | | | | | | | | | | | | | | | | | |
| 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. | | | | | | | | | | | | | | | | | | | | | | |
| Signed | | |  | | | | | | | | | | | | | | Date | | |  | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
| I WOULD LIKE TO PAY BY CHEQUE / CREDIT CARD (please make cheques payable to Harewood House Trust) | | | | | | | | | | | | | | | | | | | | | | |
| Credit Card No | | | | | | | | | | | | | | | | | | Security Code: | | | | |
| Expiry Date | | | | | | | | | Issue No | | | | | | Valid From Date | | | | | | | |
| Please notify Harewood if you: | | | | | | | | | Would like to cancel your Gift Aid declaration or direct debit.  Would like to amend your membership  Change your name or home address  No longer pay sufficient tax on your income and/or capital gains to Gift Aid. | | | | | | | | | | | | | |

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| --- | --- | --- | --- | --- | --- |
| **Instruction to your bank or**  **building society to pay by Direct Debit** | | |  | | |
| Please complete this form using a  black ballpoint pen and send it to:  Harewood House Membership Harewood House Trust Harewood  Leeds  LS17 9LG | **Service User Number**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | 7 | 6 | 0 | 1 | 1 | 5 |   **Reference (**membership number if applicable)   |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  | | | | |
| **Name(s) of account holder(s)**   |  | | --- | |  | |  |   **Bank/building society account number**   |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |   **Branch sortcode**   |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | |  |  | - |  |  | - |  |  | | | **Instruction to your bank or building society:**  Please pay Harewood House Trust Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with Harewood House Trust and, if so, details will be passed electronically to my bank/building society. | | |
| **Name and full postal address of your bank/building society**   |  |  |  | | --- | --- | --- | | To: the Manager |  | | | Bank/Building Society |  | | | Address |  | | |  |  | | |  | Postcode |  |   **Signature(s)**   |  | | --- | |  | |  | | Date |   **.**  **The guarantee should be detached and retained by the payer** | | | | |
| **Direct Debit Guarantee** | | | |  |
| * This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits. * If there are any changes to the amount, date or frequency of your Direct Debit, Harewood House Trust will notify you 14 working days in advance of your account being debited or as otherwise agreed. If you request Harewood House Trust to collect a payment, confirmation of the amount and date will be given to you at the time of the request. * If an error is made in the payment of your Direct Debit by Harewood House Trust or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society. * If you receive a refund you are not entitled to, you must pay it back when Harewood House Trust asks you to. * You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us. | | | | |