# Ashbourne Animal Welfare

"The Ark", Wyaston Road, Ashbourne, Derbys DE6 1NB.
Telephone: 01335 300494 & 300825 Email: ashbourneanimalwelfare@yahoo.co.uk

# MEMBERSHIP APPLICATION

The charity values the support it receives from its members. By joining Ashbourne Animal Welfare you will receive regular newsletters giving details of the animals rescued and rehomed, stories about how they are getting on in their new homes, details of our fundraising events and progress with developments at The Ark. In this way we can keep our membership informed and spread the word about the work the Society does in the local community.

Unless you join as a life member, your membership will be due for renewal in a year and we do hope that you will have enjoyed receiving our news and decide to continue as a member.

PLEASE COMPLETE (IN CAPITALS) AND RETURN THIS FORM ALONG WITH YOUR SUBSCRIPTION TO: **Ms. JANE WAIN, "THE ARK", WYASTON ROAD, ASHBOURNE, DERBYSHIRE. DE6 1NB.**

NAME . . . . . .

ADDRESS . . . . . .

. . . . . .

. . . . . .

POST CODE. . . . . TELEPHONE NO.. . . . . .

EMAIL ADDRESS

You can accept correspondence and the Quarterly Newsletter by Email. YES ☐ NO ☐

## TYPE OF MEMBERSHIP

| Annual Membership | | PLEASE TICK | Life Membership | | PLEASE TICK |
|---|---|---|---|---|---|
| Individual | £5 | ☐ | Individual | £30 | ☐ |
| Family | £10 | ☐ | Family | £50 | ☐ |
| Concession | £3 | ☐ | Concession | £20 | ☐ |

Adoption ☐ Name of Cat or Dog . . . . . *(Free membership for 1 year from date of adop*

**AMOUNT ENCLOSED**

*(If you wish to renew your membership by Standing Order, please complete your details on the reverse of this form).*

| | |
|---|---|
| MEMBERSHIP FEE | £ |
| DONATION | £ |
| TOTAL | £ |

DATE . . . . . .

RECEIPT REQUIRED YES☐ NO☐

Please make cheques payable to Ashbourne Animal Welfare.

## GIFT AID DECLARATION

I would like Ashbourne Animal Welfare to treat all donations I have made since 6 April 2000 and all donations I make from the date of this declaration as Gift Aid donations. *See notes on reverse.*

SIGNATURE.....DATE.....