For internal use:

Received	Paid cash / cheque/Bacs	Logged	Membership Number

Membership Registration Form and Gift Aid Declaration

HIGH WYCOMBE and DISTRICT u3a 2026 - 2027

Registered Charity 1065069

YOUR DETAILS *(Block Capitals*

Forename	Surname	Title
Email	Telephone	
Address		
	Postcode	
ICE (In Case of Emergency) *optional,* NAME:	ICE Telephone	

MEMBERSHIP FEES SEPTEMBER 2026 - AUGUST 2027

please tick where applicable

☐	**New Member** joining between 1st September 2026 – 28th February 2027	£32.00
☐	**New Member** joining between 1st March 2027 - 31st August 2027	£18.00
☐	**Associate Member:** if you are already a member of another u3a, the fee is reduced by £4 **Please state the** Name of the other u3a	- £4.00
Please complete the amount you are sending for payment	**TOTAL**	

These fees include a £4.00 subscription to our national organisation, the Third Age Trust, which provides a wide range of services, plus other interest groups & includes liability insurance cover.

PAYMENT

☐	Cheque payable to **High Wycombe and District u3a**
☐	BACS Account Name: **High Wycombe and District u3a** Sort Code **23 - 05 - 80** Account No. **5641 7001** Reference:: Y***our Name & Your Postcode***

WHERE DID YOU HEAR ABOUT US?

A Friend, a Poster, a Website, somewhere else? .....

GIFT AID DECLARATION (OPTIONAL)

I AM …. / IAM NOT …. a taxpayer (*delete as necessary*)

To help us by gift aiding your subscription so u3a can reclaim the tax, ***please tick the box***

☐ I want the charity to treat all donations I have made from the date of this declaration as GIFT AID donations

The membership subscription fee for this u3a is either £32 or £18 : for Associate Membership either £28 or £14 depending on the time of joining. Gift Aid will be claimed on these amounts. The fee secures membership of the u3a only and does not secure rights to personal use of any facilities or services provided by the u3a.

I apply for membership of High Wycombe and District u3a and confirm that I will abide by the Terms &

Conditions of membership detailed on our Website: *https://www.highwycombe.u3asite.uk*

I confirm that I have completed the form myself. I will make full payment of fees due as soon as is reasonably practicable, I will inform the u3a promptly of any changes contact details to tax status for Gift Aid.

By signing I consent to my data being used for membership purposes as detailed in our Privacy Policy on our Website.

Signed: _____ ***Date:***_____

IF PAYING BY CHEQUE, PLEASE SEND IT WITH THIS FORM TO: THE MEMBERSHIP SECRETARY, HIGH WYCOMBE & DISTRICT U3A, c/o ELWOOD, COLVILLE RD, HIGH WYCOMBE HP11 2SY
IF PAYING by BACS, EMAIL THIS FORM to *: hwu3amemsec@gmail.com*