

**The Friends of Chertsey Museum**  
Registered Charity No 1075200



**Application for Membership**

**Name** .....

**Address** .....

.....

**Postcode** ..... **Tel No** .....

**Email** .....

For a Family Membership please add the names of other members and ages of children under 16

**Names** .....

.....

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I/We apply for membership of The Friends of Chertsey Museum.

I/We enclose a cheque made payable to **The Friends of Chertsey Museum** for £ .....

\*I want The Friends of Chertsey Museum, from the date of this application, to treat as Gift Aid donations, all payments I make in respect of membership subscriptions.

\*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.

\*(Please delete these paragraphs if you do not pay income tax or capital gains tax, or if it is a business subscription.)

I agree to my details being retained and used by The Friends of Chertsey Museum and by Chertsey Museum to keep me informed of exhibitions and events at the Museum. I understand that my details will not be shared with any other party.

**Signed** .....

**Date** .....

Please return this form to:  
The Membership Secretary  
The Friends of Chertsey Museum  
33 Windsor Street  
Chertsey, Surrey KT16 8AT