

Ilka Win
Membership Secretary
The Seabird Group
10 Broomfield Park
Portlethen, AB12 4XT, UK



seabirdgroup.membership@gmail.com

Registered Charity No. 260907

Membership Application Form for Year 2010/11

Initials/Forename Surname

Organisation.....

Address.....

..... Town/City

Postcode..... Country.....

Email address (for newsletter).....

Subscription rates (please tick box below):

Ordinary £20.00 Concession* £15.00 Institution £35.00

*only applies to students or retirees from 65 years of age

Payment options:

Standing Order (see below) PayPal (rate + £1) cheque or cash

Standing Order Instruction to Bank / Building Society (for UK Members only)

To: The Manager

Bank/Building Society.....

Address.....

Town/City Postcode

Name of account holder

Account no.

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 Sort Code

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Please pay The Seabird Group (account no. 00875481) at the Bank of Scotland (sort code 80-07-24), 174 Byres Road, Glasgow G12 8SW, Scotland, the sum of £20, my membership subscription, now and on 1st February each year until further notice.

Signature

Date

Deed of Covenant (for UK members only)

To: The Seabird Group

I, (full name)

of (full address)

promise to pay the Seabird Group for four years, or during my lifetime if shorter, or until I resign my membership, whichever period is longer, such a sum as after deduction of income tax at the basic rate amounts to £ (the amount of your subscription) each year, or is equivalent to the annual membership subscription payable to the Seabird Group on the date when payment is due, whichever shall be the greater.

Signed, sealed and delivered Date

Witnessed by (signature)

Name

Address

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.....

Note: In Scotland, no witness is required, but you must write, in your own handwriting, the words "**Adopted as holograph**" above your signature.
(If you do not do this the signatures of **two** witnesses are required in Scotland.)

Credit Card Payment (for non UK members only)

I authorise you to debit my MasterCard / Visa Card no.

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Amount: £21.00

Issue date.....

Expiry date:

Name:

Signature:

Date:

Cardholder's address:

Address

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Town/City

Postcode.....

Country