



Yelverton Bohemians Cricket Club Membership Form 2017



Players Contact Details:

First Name:	<input type="text"/>	Address Line 1:	<input type="text"/>
Surname:	<input type="text"/>	Address Line 2:	<input type="text"/>
Home Tel:	<input type="text"/>	Town:	<input type="text"/>
Mobile Tel:	<input type="text"/>	Postcode:	<input type="text"/>
E-mail Address:	<input type="text"/>	Date of Birth:	<input type="text"/>

Preferred Method of Contact (please tick all that apply): Email ☐ Post ☐ Phone ☐

Annual Membership Payment Options:

Please tick the relevant box. The amount shown in **BOLD** indicates the **reduced fee** if paid on or before Saturday 3rd June 2017.

- | | |
|--|---|
| <input type="checkbox"/> Senior Playing Member - £60/£70* | <input type="checkbox"/> Student Playing Member (Option 1)** |
| <input type="checkbox"/> Junior (U18) Playing Members - £30/£35* | <input type="checkbox"/> Student Playing Member (Option 2)*** |
| <input type="checkbox"/> Country/Midweek Playing Members - £30/£35* | <input type="checkbox"/> Social Member (non-playing) - £5 |

Monthly Standing Order payment forms are available.

Notes:

- * Membership costs comprise of £10 subscription + £50/£60 donation and £10 subscription + £20/£25 donation
- ** Option 1 - No Annual Subscription payment + full Senior Match Fee per game;
- *** Option 2 - Reduced Annual Subscription set at Treasurers discretion + reduced Match Fee per game;

Emergency Contact Details:

Name:	<input type="text"/>	Telephone Number:	<input type="text"/>
Relationship:	<input type="text"/>	Alternative Tel. Nr:	<input type="text"/>
Special Medical Conditions:	<input type="text"/>	Doctors Name & Contact Number:	<input type="text"/>

Declaration:

I agree to abide by the **Club Constitution** and **Rules of Yelverton Bohemians Cricket Club (YBCC)** and any other body or club that **YBCC** is affiliated to or bound by, either on a permanent basis or Temporarily.

(Please note that members under the age of 18 are subject to the provisions of the Licensing and Gaming Laws)

Name (Print):	<input type="text"/>	(applicant/parent/guardian - please delete as applicable)
Signature:	<input type="text"/>	Date: <input type="text"/>

Gift Aid Declaration:

Name of charity or Community Amateur Sports Club: Yelverton Bohemians Cricket Club

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Please treat the enclosed gift of £ _____ as a Gift Aid donation.

I confirm that I am a UK Income or Capital Gains taxpayer. I have read this statement and want the charity or Community Amateur Sports Club (CASC) named above to reclaim tax on the donation detailed below, given on the date shown. I understand that I must pay an amount of Income Tax and/or Capital Gains Tax in the tax year at least equal to the amount of tax that all the charities and CASCs I donate to, will reclaim on my gifts for that tax year. I understand that other taxes such as VAT and Council Tax do not qualify. I understand the charity will reclaim 25p of tax on every £1 that I have given.

Donor's details

Title: _____ First name or initial(s) _____ Surname: _____
Full home address _____ Postcode: _____
Signature: _____ Date: _____

Please notify the charity or CASC if you: Want to cancel this declaration, Change your name or home address, or no longer pay sufficient tax on your income and/or capital gains.

If you pay Income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your Self Assessment tax return or ask HM Revenue and Customs to adjust your tax code.

Existing Members ONLY:

Please return the completed Membership Form with your Annual Membership payment (cheques made payable to YBCC) to:

Geoff Brain - Treasurer
99 Compton Avenue
Plymouth
PL3 5DD

or alternatively hand your completed form and payment to a committee member

New Members ONLY:

Please return the completed Membership Form to:

Mike Godkin – Secretary
58 Station Road,
Horrabridge, Devon
PL20 7RD

or alternatively hand your form to a committee member

Committee Use Only:

Proposal Accepted: ☐ Date:

Proposal Rejected: ☐ Date:

Under Scrutiny: ☐ Date:

Membership Withdrawn: ☐ Date:

Comments: