

NRAS Gift Membership Form

Your Name:	Your Address:			
	Your Email:			
Your Contact no:	Their name:			
Their Address:				
Their Email:	Their Contact no	Their Contact no:		
Membership rates: Please select the type of Gift Membership you require:				
Wellbeing Members	ship	£29.00 per annum		
Wellbeing+ Member	ership	£38.00 per annum		
Lifetime Membersh	iip	£600.00 single payment		
 Digital Membership recurring card only 		£19.00 per annum		
In addition to your Membership you can				
Make a regular monthly donation of f				

OR Make a one-off donation of

Payment can be m	nade by:			
 Cheque or postal order - please make cheques payable to NRAS Direct Debit - please complete the form <u>overleaf</u> and return to NRAS Credit/Debit Recurring card - please give card details below 				
Credit/Debit Cards	Card Number			
CVC (last 3 digits on the signature strip)				
Recurring card pay	vment Yes/No (delete as required) Expiry date			
	Increase your gift by 25% at no extra cost to you.			
giftaid it	If you are a UK taxpayer, the value of your gift can be increased by 25% under the Gift Aid scheme at no extra cost to you. NRAS will claim 25p on every £1 donated. The tax reclaimed through gift aid will be used to help fund the whole of NRAS' work.			
	d like NPAS to treat all the donations I make from today, until I notify, you			

otherwise, as Gift Aid donations.

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 notify the charity 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.



Please fill in the form using a ball point pen and send it to:

NRAS
Ground Floor
4 The Switchback
Gardner Road
Maidenhead
Berkshire
SL6 7RJ

Name(s) of Account Holder(s)

Branch Sort Code

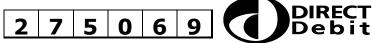
Bank/	Buildin	g Socie	ety acc	ount ni	umber		_

Name and full postal address of your Bank or Building

To: The Manager	Bank/Building Society		
Address			
	Postcode		
Reference (official use only)			

Instruction to your Bank or Building Society to pay by Direct Debit

Service User Number



FOR Go Cardless re NRAS OFFICIAL USE ONLY This is not part of the instruction to your Bank or Building Society.				
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Instruction to your Bank or Building Society				

Please pay Go Cardless re NRAS Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with Go Cardless re NRAS and, if so, details will be passed electronically to my Bank/Building Society.

Signature(s)

Date

Banks and Building Societies may not accept Direct Debit Instructions from some types of account

This guarantee should be detached and retained by the Payer

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NRAS is a private company limited by guarantee. Registered in England & Wales No 712710 Charity Nos: 1134859 SC039721 0845 458 3969 www.nras.org.uk



- This Guarantee is offered by all Banks and Building Societies that accept instructions to pay Direct Debits.
- If there are any changes to the amount, date or interval of your Direct Debit, Go Cardless re NRAS will notify you 3 working days in
 advance of your account being debited or as otherwise agreed. If you request Go Cardless re NRAS to collect a payment, confirmation of
 the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit by Go Cardless re NRAS or your Bank or Building Society, you are entitled to a full
 and immediate refund of the amount paid from your bank or building society If you receive a refund you are not entitled to, you must
 pay it back when Go Cardless re NRAS asks you to.
- You can cancel a Direct Debit at any time by simply contacting your Bank or Building Society. Written confirmation may be required. Please also notify us.