

Membership Form 2023/24

correspondence to: Mrs Miss Mr Ms Dr | Other First name(s) Last name **Address** Date of Birth Phone number **Email address** Please tick this box if you would like to receive your newsletter by email Does the person named above have a learning disability? No Please tell us the names of any other people in your household that you would like to include on the membership*: Name Do they have learning disability? *Please note, people living in supported living/ residential establishments require their own individual membership. We can't include all residents on one membership. As a member you can vote at the AGM (Annual General Meeting). The AGM will be on Thursday 22nd February 2024 at 2:00pm, are you likely to attend? Maybe Yes No Would you like a reminder about the AGM (Annual General Meeting) nearer the time? Yes No

Please include the details of the person we should address the newsletters and any other

Wirral Mencap. Registered Office:42-44 Market Street, Birkenhead, CH41 5BT. A company limited by guarantee registered in England and Wales (08668735) and a charity registered in England and Wales (1153742)

Your Support for Wirral Mencap:	
I would like to remain/ become a member	£5
I would like to include a donation with my membership	£5
Payment Method: I have made a BACS payment to Wirral Menca	Bank: Lloyds Bank
or I have set up an annual standing order	Branch Sort Code: 30 15 52 Account Number: 46256560
or I have paid securely using the 'Donate Now' bu on the Wirral Mencap website. www.mencapwirral.org.uk	Please remember to include your name.
or I enclose a cheque made payable to Wirral Me or	ncap
I will bring cash into the Wirral Mencap office	
I would like to find out more about other ways I c Befriending Mentoring Volunteering Activities	an support Wirral Mencap. I am interested in: Fundraising Being a Trustee Office Admin Supporting other
7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	families
Gift Aid Declaration (If you are not a UK Taxpay Please tick all relevant boxes. I want Wirral Mer given. This applies to: This payment/donation All payments/emade in the la	cap to reclaim 25p of tax on every £1 I have donations Future payments/donations
If I have ticked any of the boxes above, I confirm I have read this statement and want Wirral M	n that I am a UK Income or Capital Gains taxpayer encap to reclaim tax on the payment/ donation n. I understand that if I pay less Income Tax / o
Capital Gains tax in the current tax year than the	amount of Gift Aid claimed on all of my donations derstand Wirral Mencap will reclaim 25p of tax or
Please sign here	Date

Return Address: Wirral Mencap, 42-44 Market Street, Birkenhead, CH41 5BT

Telephone: 0151 666 1829