

In Confidence

The Royal Marines Association

Scarborough & District Branch

APPLICATION FORM

(Please complete in BLOCK CAPITALS)

Surname:..... Service Type (e.g. RM, RN):

Forenames:..... Service No:

Title (Mr, Mrs, Miss, Ms):..... Date Enlisted:

Decorations (e.g. MBE):..... Date of Discharge:

Date of Birth:..... Rank on Discharge:

Address:..... Or family connection:

..... Present occupation:

..... RMA Membership type: Full

(Please Tick one)

Associate

Postcode:.....

I apply for:
(Tick as Required)

£10.00 RMA Annual Membership
(Free if over 80 years of age)

Tel: Home:.....

£17.00 Friends of RM Museum

Tel: Mobile:.....

£..... Donation

Email Address:.....

Total Payment £

Date joined RMA:.....

Branch:.....

I wish to be considered for:
(Tick as Required)

Not Forgotten Association trips

(Tick only if in receipt of a War Pension)

Royal Garden Parties

PLEASE PROVIDE A 'PASSPORT' STYLE PHOTO FOR YOUR MEMBERSHIP CARD

Signature:..... Date:

All information will be treated as confidential and will not be divulged outside the RMA

Return completed form to:

The Secretary, Scarborough & District RMA, 8 Woods Close, Burniston, Scarborough, North Yorkshire, YO13 0JB

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Amended 06 Jan 2011

BANK STANDING ORDER MANDATE
*(Please complete details marked * in BLOCK CAPITALS)*

To: * The Manager: * Name of Account to be debited:

* Address:

 * Account Number:

* Postcode: * Sort code:

Please pay: **Barclays Bank plc, Southsea Branch** * Signature:
Sort Code: 20-69-34

For the credit of: **The Royal Marines Association** * Date:
Account No: 20736058

Quoting Ref:

* The sum of: *(Total amount to be debited)*

Commencing: *(date to be inserted by RMA)*

And continue to pay **annually** on this date until further notice from me

CREDIT/DEBIT CARD DETAILS

Card type: (please tick one)

MasterCard Other - please specify

Visa

Switch

Card Number _____ / _____ / _____ / _____

Start date: mm/yy _____ / _____ Expiry date: mm/yy _____ / _____

Issue No. *(if applicable)* Last 3 numbers on signature strip

Signature: **Date:**

All information will be treated as confidential and will not be divulged outside the RMA

GIFT AID DECLARATION

If you pay income tax, you can contribute in a particularly valuable way by completing a Gift Aid Declaration asking Inland Revenue to treat your subscription, or any other donation you make, as a Gift Aid Declaration. The RMA can then recover the tax that you have already paid on that money. If you wish to do this then please complete and return the Gift Aid Declaration Form which is reproduced below.

ROYAL MARINES ASSOCIATION

Title Forename(s)

Surname

Address

.....

.....

Post Code RM ID No

I want the charity to treat all donations I make from the date of this declaration until I notify you otherwise as Gift Aid Donations.

Signature Date

Notes.

1. *If your declaration covers donations you may make in the future:*

a. please notify the charity if you change your name or address while the declaration is still in force

b. you can cancel the declaration at any time by notifying the charity – it will then not apply to donations you make on or after the date of the cancellation or such later date as you specify.

2. *You must pay an amount of income tax and/or capital gains tax at least equal to the tax that the charity reclaims on your donation in the tax year (currently 28p for each £1 you give).*

3. *If in the future your circumstances change and you no longer pay income tax on your income and capital gains equal to the tax that the charity reclaims, you can cancel your declaration (see note 1 above).*

The Globe & Laurel Subscription Form

Please complete and return to:

G&L Subscriptions
HMS Excellent, Whale Island, Portsmouth
Hampshire PO2 8ER

Name & Initials														
Address & Postcode														
Telephone Number														
Email Address														
Payment Method (✓)			Card			Cash			Cheque					
Card Number														
(No American Express or Diners Club)														
Valid From			/			Expiry Date			/			Issue Number		
For Credit/Debit please supply the 3 digit code (on reverse of card)														
United Kingdom & Northern Ireland £12.00														
Europe & Republic of Ireland £21.00														
Rest of the world £30.00														

Please make cheque payable to 'The Globe & Laurel'
Telephone enquiries: 023 9254 7209

In completing this form you are requesting to become a subscriber to the Globe & Laurel,
bi-monthly for a period of 12 months.