

## Trinity Community Arts Ltd Annual Membership Form

### Contact Details

|   |  |
|---|--|
| <b>Title:</b>   |  |
| <b>Name:</b>  |  |
| <b>Address:</b>   |  |
| <b>Postcode:</b>  |  |
| <b>Telephone:</b>   |  |
| <b>Email:</b>   |  |
| <b>I agree to receive notices and agendas by email <i>please tick</i></b> |  |

### Category *please tick*

|  |  |
|--|--|
| <b>Full voting member<br/>£5</b>               |  |
| <b>Concessionary*<br/>voting member<br/>£3</b> |  |

|   |
|---|
| <p><i>Office use only</i></p> <p>Payment received:.....<br/>(sign and date)</p> <p>Proof of status:.....</p> <p>Membership number:.....</p> |
|---|

### Payment method *please tick*

|   |  |
|---|--|
| <b>Cash</b>   |  |
| <b>Cheque</b> <i>made payable to Trinity Community Arts</i>   |  |
| <b>BACs Transfer</b><br>reference:<br>"TCA Membership"<br>Triodos Bank<br>sort code: 16-58-10<br>acc no: 03897800 |  |

**I have read and agree to the Terms & Conditions for Membership and the Trinity Code of Conduct**

**I understand that I will need to contribute up to and no more than £10 in administration fees if TCA goes into liquidation, in accordance with our Memorandum and Articles of Association**

Signed:.....

Date:.....

**Please return this form and your method of payment to the address or email below**

*\*Concessions - students, unemployed, those on benefits - proof of status may be requested*

*Please note your membership will commence from the date payment is entered into our account*