

APPLICATION FOR MEMBERSHIP RENEWAL FORM.

Please print and complete this form and return it to the studio at Newcastle Art centre –
whether you are paying by cheque or bank transfer.

If you are paying by cheque, enclose the cheque with the form.

Please indicate as appropriate;

I wish to renew membership for the year 2020 (£132)

I wish to continue use of a locker (£8)

I wish to renew student membership for the year 2019 (£40))

*If you **already pay by instalments** (2 or 4) you may continue the same arrangement by enclosing all cheques, post dated as appropriate with your application form. (dates 1 Jan; 1 March; 1 June; 1 Sept)*

No rebates are given if a member resigns during the year unless approved by Council due to exceptional circumstances.

Please tick: **A cheque(s) is/are enclosed**

I have paid by bank transfer

The bank account details are;

Account: North of England Art Club. Account Number; 70673811. Sort Code; 20-59-61

NAME (block Capitals please) _____

Address; _____

_____ POST CODE _____

Telephone (preferred number for contact) _____

Email address _____

*Providing this information also consents to us communicating with you through the email address you give. We will **ONLY** use it for communication about NEAC matters and events. We will **NOT** share your email with any other organisation without your prior consent. If an enquiry comes for you personally, or for you as a committee member, through the North of England Art Club email, we will forward it to you.*

Please go to the MEMBERSHIP page on the Club website to read and /or print the Policy Statements on Health and Safety, safeguarding of models and use of solvents and sign this form to confirm that you have read and will comply with them. The Statements are also on prominent display on the Club noticeboard and in the studio.

* I wish this payment and any donations and subscriptions I make in the future to the North of England Art Club (Registered Charity No. 512764) to be treated as a donation under Gift Aid. I confirm I am a UK taxpayer and my payments are at least equal to the amount reclaimed. I will notify the Club if I wish to cancel this declaration or if I no longer pay sufficient tax on my income.

Name (block capitals) _____

Signature

_____ Date _____

* Delete as appropriate.