

Membership Subscription form for 2024

Subscriptions are due on the 1st January each year

Name.....

Address.....

.....

Post Code.....

Telephone.....

Email address.....

Signed.....

Date.....

Enclosed is my/our subscription of £..... (£2.00 per person)

Donation of £.....

**See box below

Total £.....

**** I would like Mencap to reclaim tax on this donation. I am currently a UK taxpayer, and the amount of tax I pay exceeds the amount I would like Mencap to reclaim.**

Please tick

Cheques should be made payable to Maidenhead Mencap.

Send to: Treasurer – Mr A Kremenstein, 1 Derwent Drive, Maidenhead, Berks, SL6 6LA.

Bank Account: Maidenhead Mencap - Sort Code 30-95-36, Account No. 00283655

I am/we are the Parents/Carers of the person named below:-

Name of person with learning disability.....

Address.....

.....

Post Code.....

Date of Birth.....

Data Protection

The above details will be held by Maidenhead Mencap. If you do not want us to keep these details, please let us know.