Barnstaple, Devon.
Registered Charity: 11026238.
Website: https://taw.u3asite.uk/

Taw Membership Secretary:
Mrs Wendy Evans
3 Combrew Cottages
Combrew Lane
Bickington
Barnstaple. EX31 2ND

Tel: 01271 314777

Email: evanswendyj@hotmail.com

Office Use Only			
Date		SSAE	
cash		GA	
cheq		NL	
BACs		TAM	

MEMBERSHIP APPLICATION FORM 2026/27

Tick one box as applicable

Renewal: ☐
New Member: ☐
Affiliated Membership: ☐

Each applicant must complete and sign the form below.

APPLICANT(s) DETAILS:

Title		Forename		Surname	
Address					
				Area	
Town				Post Code	
Telephone Number				Mobile No.	
Email Address					
Emergency Contact Name				Contact No.	
Partner Applicant					
Title		Forename		Surname	
Telephone Number				Mobile No.	
Email Address					
Emergency Contact Name				Contact No.	

Affiliated members must state their Main u3a membership branch and membership number.			
Main Applicant		Membership No.	
Partner Applicant		Membership No.	

Proof of membership will be required to verify an affiliated membership. Please attach a copy of your existing u3a membership card.

PAYMENT

Please complete the form below whether paying by cheque, cash, or Internet Banking, (BACS -Bankers' Automated Clearing System). If you are paying by BACS, please indicate in the bank reference whether you are paying for Newsletter Delivery or TAM; your name is automatically added by the bank and is not needed as a reference. Please note, from 1st January 2027 there is a 50p surcharge for each cheque payment. Please add 50p to the amount below to cover bank charges.

MEMBERSHIP FEES (Tick one item Only)

Annual Membership:	1st April 2026 to 31st March 2027	£12.00	☐
Members Joining after:	1st October 2026 to 31st March 2027	£6.00	☐
Affiliated members:	1st April 2026 to 31st March 2027	£8.00	☐
Affiliated Joining after:	1st October 2026 to 31st March 2027	£4.00	☐
Tick the box if you are 90+ years of age by 31st March 2026		**Free**	☐

Membership fee includes a fee of £4.00 paid to our National Organisation, the Third Age Trust.

PAYMENT DETAILS:

➢ If you would like to receive the National u3a Magazine (TAM)	£4.50	☐
➢ No Internet Access? The Monthly Newsletter can be sent by post	£10.50	☐
➢ Posting Newsletter after 1st October 2026	£5.25	☐

Please add the additional fee to the membership fee if choosing one of the above extras.

CHEQUE	☐	Cheque Number: (Add 50p to the amount and make payable to TAW U3A)		
Internet Banking (BACS)	☐	**Account Name**		**TAW u3a**
	Sort Code:	**30-90-49**	**Account Number:**	**02341066**
CASH	☐	Please discuss and arrange cash applications with the Membership Secretary by email or at the monthly meeting.		

Members, please sign below to show your consent to the above and send the completed form and cheque, (if this option is chosen), to the membership secretary at the address shown at the top of the form. **Please include a Stamped Self-Addressed Envelope (SSAE) for postage of your membership card.** Alternatively, the membership application can be handed in to the Membership Secretary at the coffee morning along with your payment and SSAE.

Applicant Signature (1)		**Date:**	
Applicant Signature (2)		**Date**	

The following documents can be found on our website: https://taw.u3asite.uk/

> Membership Code of Conduct

> Taw u3a Privacy policy

> **Gift Aid Form** *If you are a UK taxpayer, we can reclaim the tax on your membership subscription and donations. Please complete the attached gift aid form if this applies.*

GIFT AID FORM

TO ALL TAW u3a MEMBERS WHO ARE TAXPAYERS
Gift Aid raises more funds for the Taw u3a without costing you a penny more. If you are a UK taxpayer, we can reclaim the tax on your membership subscriptions and donations. For every £1 of your subscription, we can claim a further 25p from HM Revenue and Customs.

Colin O'Brien
Taw u3a Treasurer

✂

GIFT AID DECLARATION

I/We would like the Taw u3a to reclaim the tax on this and any other eligible donations or membership subscriptions that I/we may make in the future or have made in the past 4 years. I/We understand that I/we need to pay enough Income Tax or Capital Gains Tax in each year to cover the Gift Aid claimed on all my/our donations otherwise it is my/our responsibility to pay any difference.

Applicant 1 Full Name:			
Applicant 2 Full Name:			
Joint Address:		Post Code	
Signature (1)		Date	
Signature (2)		Date	