

MEMBERSHIP APPLICATION

I, (name) _____ wish to be admitted as a full member of the Norman Lockyer Observatory Society (NLOS) and request my name be entered on the Register of Members, subject to the NLOS Memorandum and Articles of Association, and I hereby agree to pay the appropriate annual membership subscription as determined from time to time by the Society.

I undertake to contribute to the assets of the Society, in the event of the Society being wound up while I am a member or within one year of my ceasing to be a member, for payment of the debts and liabilities of the Society contracted before I cease to be a member and of the costs, charges and expenses of winding up, and for the adjustment of the rights of the contributors among themselves, such amount as may be required not exceeding £10 (ten pounds) in total. (This limits the liability of each NLOS member to £10 and qualifies the Society to be a Registered Charity).

GDPR – The NLOS needs to keep a record of your personal details for membership and administration purposes. We will use your email address to send you NLO News and other information and notices relating to the Society, membership and volunteering. We do not share your data with any other organisation. If you request it, we will delete any data we hold about you unless a regulatory or legal reason prevents this. For full details and privacy notice please see <https://normanlockyer.com/wp-content/uploads/NLOS-Privacy-Notice-v3-FINAL.pdf>

I agree to the NLOS using my personal details below as stated above [.....] please tick

I understand that it is a condition of membership that I will become a volunteer of the Norman Lockyer Observatory Society in so far as this is practicable.

Signed _____ Date _____

Full Name (print) _____

Address _____ Post Code _____

Tel: _____ e-mail: _____

Please make cheques payable to "Norman Lockyer Observatory Society" or if you prefer make a direct payment to our Lloyds Bank account, Sort Code: 30-94-36 Account Number: 01249940, Ac Name: Norman Lockyer Observatory Society, please ensure that your name is the reference associated with the payment,

Adult £35 p.a. (£60 couple*) to 31st March. To become an Astroscout please see the Astroscout Coordinator
*Please complete additional membership form below for the second person

GIFT AID DECLARATION NORMAN LOCKYER OBSERVATORY SOCIETY (Reg Charity No. 104887)

Please treat:

* all subscriptions / donations that I make from the date of this declaration as Gift Aid Donations until I notify you otherwise.

* the enclosed donation of £ _____ as a Gift Aid Donation (please also in words) _____

* delete as appropriate

You must pay an amount of Income Tax and / or Capital Gains Tax at least equal to the tax that the Society reclaims on your subscriptions / donations in the appropriate tax year (currently 25p for every £1 you subscribe / donate).

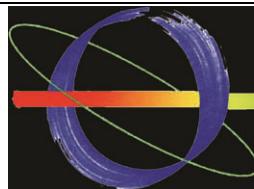
Full Name (print) _____

Address _____

Post Code _____

Signed _____ Date _____

Please send forms to: The Treasurer, Norman Lockyer Observatory, Salcombe Hill, Sidmouth, EX10 0NY



NORMAN LOCKYER OBSERVATORY



MEMBERSHIP APPLICATION – SECOND MEMBER (COUPLE)

I, (name) _____ wish to be admitted as a full member of the Norman Lockyer Observatory Society (NLOS) and request my name be entered on the Register of Members, subject to the NLOS Memorandum and Articles of Association, and I hereby agree to pay the appropriate annual membership subscription as determined from time to time by the Society.

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Signed _____ Date _____

Full Name (print) _____

Address _____

Post Code _____

Tel: _____ e-mail _____