**2018/19 Membership Application and Renewal Form**

# Name and Address

|  |  |
| --- | --- |
| Full name: |  |
| Address: |  |
| Post code: |  |
| Telephone number: |  |
| Email address: |  |

**B. Subscription**

For details of classes of membership, please see renewal notice.

|  |  |  |
| --- | --- | --- |
|  | Annual | TOTAL |
| Registered Member (with e-version of BeeCraft) | £45.50 |  |
| Partner | £15.50 |  |
| Country | £12.50 |  |
| Additional cost for paper version of BeeCraft | £5.50 |  |
| Associate | £2.50 |  |
| Friend & Junior (Not BBKA) | £5.50 |  |
| Total number of colonies to be insured – enter number of hives |  |  |
| Additional BDI \*(maximum 39 colonies) : (See attached notice) | |  |
| Association Apiary fees per colony (see reverse) – enter number of hives | No |  |
| Donation to Club House and Teaching Apiary Fund | |  |
| Donation to Divisional Funds - Weybridge | |  |
| Donation to BDI Research Project (£5 suggested) | |  |
| Total | |  |

**C. Electronic Payment**

Please make your payment electronically to:

Name of bank: CAF Bank Ltd

Name of account: Surrey Beekeepers Association - Weybridge

Sort code: 40 52 40

Account number: 00017543

Please send a copy of this form duly completed to [michaelfmain@hotmail.com](mailto:michaelfmain@hotmail.com)

**Payment by cheque**

If you prefer to pay your subscription by cheque please make it make payable to

‘Surrey Beekeepers Association - Weybridge Division’ and send it to the Treasurer:

Mr M Main,

Hill House, Northfield Place,

Weybridge, Surrey, KT13 0RF

Telephone: 01932 849080

**D. My Data**

I agree that my personal data may be held and used by Weybridge division for the purposes and in the manner described in the attached General Data Protection Regulations 2018 notice.

|  |  |  |  |
| --- | --- | --- | --- |
| *Signed:* |  | *Date:* |  |

**F.** **Gift Aid Declaration**

Please treat the above subscription (excluding Paper version of BeeCraft, additional BDI and Apiary Fees) as a Gift Aid donation.

|  |  |  |
| --- | --- | --- |
| I (Full name including title) | |  |
| of (Full address) |  | |
| Postcode |  | |

Wish that all the subscriptions and or donations that I have nade or may make in the

future to Surrey Beekeepers Association Weybridge Division (the charity) be treated as Gift Aid donations.

I wish the Charity (Registered no, 1026386 ) to reclaim tax on my donations and I confirm that I pay income tax of an amount equal to the tax that will be reclaimed. If I cease to pay such tax I will inform the Charity.

|  |  |  |  |
| --- | --- | --- | --- |
| *Signed:* |  | *Date:* |  |

**F.** **Apiary rents**

# Fees: Rowtown – £15 per colony

For members with colonies at the apiary, please sign below.

**I confirm that I have read and understood the Apiary Rules and I agree to abide by them.**

|  |  |
| --- | --- |
| ***Signed:*** |  |