

# WESTER ROSS FISHERIES TRUST: MEMBERSHIP FORM

Registered Charity SCO50755



Please return via email to: [admin@wrft.org.uk](mailto:admin@wrft.org.uk) or by post to:  
Wester Ross Fisheries Trust, Harbour Centre, Pier Road, Gairloch, IV21 2BQ

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Thank you for supporting the work of Wester Ross Fisheries Trust (WRFT).

## **Member details**

Full name(s) (incl title):

Address:

E-Mail address:

Telephone No:

## **Membership type** (please tick):

Annual (per person)	£ 25
Life membership (single person)	£150
Life membership (2 persons)	£200
Donation (please specify amount)	£

**Total amount paid £**

Please pay direct to: The Co-operative Bank. Account Number: 67379635

Sort Code: 08-92-99. Account Name: Wester Ross Fisheries Trust.

If you wish to pay your annual membership by standing order, please complete the form below.

## **Gift Aid**

Boost your donation by 25p of Gift Aid for every £1 you donate. In order to Gift Aid your donation you must tick the box below and sign alongside:

I wish to Gift Aid my donation of £            to Wester Ross Fisheries Trust ☐ Signed.....

I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax in the current tax year than the amount of Gift Aid claimed on all my donations it is my responsibility to pay any difference. Please notify us if you want to cancel this declaration, change your name or home address or no longer pay sufficient tax on your income and/or capital gains.

**Data Protection.** The information provided will be held securely in accordance with the General Data Protection Regulations (GDPR) and will be used for processing your membership and for mailing you with information about WRFT. We do not share this information with any other organisation.

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## **Instruction to your Bank or Building Society to pay Standing Order:**

**PLEASE PAY THE FOLLOWING** to: The Co-operative Bank.

Account Name: Wester Ross Fisheries Trust. Account Number: 67379635. Sort Code: 08-92-99.

Amount: £            on: (date)            and annually thereafter on the same date.

## **TO BE DEBITED FROM MY ACCOUNT**

Bank name and address:

Name of Account holder:

Branch sort code:

Account Number:

Signature(s)

Date: