Membership Form

Categories

Individual Membership  £20
Family Membership  £25
Student Membership  £6

I wish to become a member at the rate indicated above.

Surname:……………………………………Title:…………...Initials:……………..

Address: …………………………………………………………………………………
………………………………………………………………………………
………………………………………………………………………………

Post Code:…………………….……Telephone:…………..………………….…

Email Address……………………………………………………………………
(Only to be used for communicating information with members)

Data Protection Act

I/We agree to my/our names being stored on a computer database

Signature/s:…………………………………………………………………………….. Date:  ………..…..

Please pay by standing order or by cheque, and if possible please Gift Aid your subscription.

Gift Aid Declaration

I am a UK tax payer and would like LAHS to treat any subscription I pay on or after the 6 April 2012 as a Gift Aid Donation.

Surname:……………….. ………..Title:…………...Initials:……………..

Address: …………………………………………………………………………………
………………………………………………………………………………
………………………………………………………………………………

Post Code: …………………..
Standing Order Mandate

To: .................................................................Bank/Building Society

Address: ........................................................................................................................................
........................................................................................................................................................
........................................................................................................................................................

Post Code: ..........................................................

Please pay Leicestershire Archaeological and Historical Society:

£……….. now, on the 1st May next, and annually thereafter, to their bank at:
(delete as applicable)

Nat West Bank
Leicester Customer Service Centre,
11 Western Boulevard,
Bede Island,
Leicester. LE2 7EJ

Sort Code 60-60-06   Account Number 87270080

Name (print): .................................................................................................................................

Account Name: ............................................................................................................................

Sort Code: ............... Account Number: ..............................................................

Signature:..................................................................................................................Date:.........................

Please return completed forms (or direct any queries) to:
Mr. Matthew Beamish,
Hon. Membership Secretary,
LAHS, c/o ULAS,
School of Archaeology and Ancient History,
University of Leicester, University Road,
Leicester LE1 7RH
Tel 0116 2525234 Email mgb3@le.ac.uk