

Hampton School Music Society

I / We would like to become member(s) of the Hampton Music Society

	1
Name	Phone
[] [
Address	Postcode
	Year group
Email (will be used to give you advance notice for healing at negular queste)	
Email (will be used to give you advance notice for booking at popular events)	
]
Son's name	
Instruments played (including voice) and approximate grade(s)	
Subscription	
The membership subscription, currently £30 per family, will be co	ollected annually with the School
fees each Spring Term	
The information you share in this form will be shared with and use	ed by the School to deduct the
annual Music Society membership subscription from your Spring t	•
information you share with the Music Society will be shared with	·
by the Music Society until it is no longer required.	the School and Hiving and retained
by the Music Society until it is no longer required.	
Gift Aid (the HSMS can claim a tax refund on your subscription)	
Lam a LIV tay navor and wish my subscription to be treat	ad as Cift Aid (please complete the
I am a UK tax payer and wish my subscription to be treated. Gift Aid form on the reverse)	ed as Gift Aid (please complete the
Gir Ald form on the reversey	
I am willing to help out at HSMS events from time to time	2
Signaturo	Date
Signature	Date

Please hand your completed form to a member of the HSMS Committee or return to: *The Performing Arts Co-ordinator, Hampton School, Hanworth Road, Hampton, Middlesex TW12 3HD*



Gift Aid declaration – for past, present and future donations

Hampton Schoo	l Music Society	
Please treat as Gift	Aid Donations all qua	lifying gifts of money made
today	in the past	in the future
(Please tick all boxe	es you wish to apply)	
year that is at least Clubs (CASCs) that	equal to the amount I donate to will reclair VAT and Council Tax	nt of Income Tax and/or Capital Gains Tax in the current ta of tax that all the charities and Community Amateur Sport n on my gifts for the current tax year. I understand that do not qualify. I understand the charity will reclaim 25p of
Donor details (to b	e completed by one po	erson only)
Title:	Initial(s):	Surname:
Address:		
Postcode:		
Son's Name:		Son's year group: