

**Visual Impairment Breconshire  
Membership Subscription Application Form  
April 2019 - March 2020**

Forename: \_\_\_\_\_ Surname: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Preferred format: (eg large print, audio CD, Email etc)

\_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**GIFT AID:** If you are a UK taxpayer, you can boost your membership / donation by 25p for every £1 you give.

I am a UK taxpayer. Please treat all membership subscriptions/donations I make to Visual Impairment Breconshire as Gift Aid until further notice. I understand that if I pay less Income Tax and/or Capital Gains tax than the amount of Gift Aid claimed on all my donations in that tax year, it is my responsibility to pay any difference.

**Please return your completed form along with your £5 payment (cheque or cash) to Rebecca Phillips, Secretary, Visual Impairment Breconshire, C/o Wales Council of the Blind, Hastings House, Fitzalan Place, Cardiff CF24 0BL.**