



Please return completed forms to PCN Britain, 26 High Street, Newnham, Gloucestershire, GL14 1BB

Membership Options

We continue to offer concessionary and donor options. Please tick your choice:

- £15 full membership. (£30 for a full year, due in January)
- £7.50 reduced option for those on limited income (£15 full year)
- £22.50 donor option for those who wish to give more (£45 full year)
- £2.50 full-time student fee (£5 full year)
- I enclose an additional donation of £ (for any of the options above)

Method of Payment

Please tick one of the following

- By cheque made payable to PCN Britain By Direct Debit
- By an online banking payment to the account details shown opposite
- Through an existing Standing Order New Standing Order (see opp.)

Contact Details

Your contact details are treated as confidential and will only be used for PCN activity, such as sending you the quarterly Progressive Voices and other PCN updates. We will normally contact you by post or email. Your phone number will only be used if post was returned or an email bounced back.

Ms / Mrs / Mr / Revd / Other	Phone
Name	
Email	
Congregation / Christian Community	Your home Postal Address
	Post Code

Local Group Membership

Please tick as appropriate

- I attend one of PCN's local groups. Which?
 - Tell me of my nearest group I am interested in starting new local group
- Groups are listed at <http://www.pcnbritain.org.uk/index.php/locations/>

"Progressive Voices" delivery

Please tick as appropriate

- I would prefer to receive the PCN quarterly in hard copy by post
- I would prefer to receive the PCN quarterly by email as a PDF file
- I would like an additional hard copy of the PCN quarterly by post at a cost of £2 (full year cost £4, payable with annual subscription)

Gift Aid Declaration

YES, I want to Gift Aid my donation and any donations I make in the future or have made in the past 4 years.

I am a UK taxpayer and 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 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

Signed _____ Date _____

Standing Order Mandate Form

Please be sure that your bank allows standing orders on your chosen account.

My Bank	
Branch Address	
	Post Code:

Until further notice, please make the following payments by banker's standing order, cancelling any previous instructions to the payee.

Pay for the credit of PCN Britain	The Co-operative Bank, PO Box 250, Skelmersdale, WN8 6WT
Sort Code	08-92-99
Account Number	65098581
Amount (figures)	£
Amount (words)	
Every	Year / Quarter / Month
Date of initial Payment	___ / ___ / ____
Date of subsequent payments if different	___ / ___ / ____

I hereby authorise you to set up this standing order payment on my account

Name of account	
Sort Code	
Account Number	

Signed

NAME	
Date	
Address	
	Post Code:
Phone	