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**MEMBERSHIP APPLICATION FORM**

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| --- | --- |
| **Individual Membership**  | **£10 per year** |
| **Family Membership** | **£15 per year** |
| **Affiliated Membership**  | **£20 per year** |
| **Overseas Membership**  | **£20 per year** |

**Name: ………………………………………………………………………..**

**Address: ……………………………………………………………………..**

 **…………………………………………………………………………**

 **…………………………………………………………………………**

**Post Code: ………………………………**

**Telephone No.: ……………………………………………………**

**Email Address: ……………………………………………………………….**

**Membership**: **Individual** **Family** **Affiliated**  **Overseas** 

**Amount: £ ………………**

**Signature: ……………………………………………**

**Date: ………………………….**

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| Gift Aid Declaration Form**Please tick box if you are a Tax Payer this would enable the Society to reclaim tax on subscriptions/donations now and in the future. No further action is required on your part. Thanking You.**   |

**Please print off and complete this form, and send it by post with cheque/postal order payable to RESCARE for appropriate fee to:**

**RESCARE**

**Steven Jackson House**

**31 Buxton Road**

**Heaviley**

**Stockport**

 **Cheshire**

**SK2 6LS**