TUST FORM 03

TUST RENEWAL FORM

Please complete all sections of this form as accurately as you can using block capitals

SECTION 1: ABOUT YOU...

MEMBERSHIP NO: ☐☐☐☐

SURNAME: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

FIRST NAME: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

TITLE: Please tick **Mr** ☐ **Mrs** ☐ **Miss** ☐ **Ms** ☐ **Dr** ☐

DATE OF BIRTH: D D M M Y Y Y Y ☐☐☐☐☐☐☐☐

ADDRESS: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

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☐☐☐☐☐☐☐☐ POST CODE: ☐☐☐☐ ☐☐☐

HOME TELEPHONE: AREA CODE ☐☐☐☐☐ ☐☐☐☐☐☐

MOBILE TELEPHONE: AREA CODE ☐☐☐☐☐ ☐☐☐☐☐☐

EMAIL ADDRESS: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

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SECTION 2: MEMBERSHIP RENEWAL...

I wish to renew my membership of Torquay United Supporters' Trust in accordance with its rules and constitution. I enclose the the annual membership fee as indicated below. Full members with voting rights must be aged 16 or over.

Please tick your required membership type. Concessions are Over 65, the unemployed and students (please attach proof of your qualification for a concessionary rate).

ADULT	£12.50	☐
UNDER 16 - JUNIOR	£5.00	☐
CONCESSIONS	£6.00	☐

I enclose the membership fee of £.....

Alternatively you can join the trust by setting up a Standing Order arrangement for a minmum cost of £2 per month. Please use the separate Standing Order form for this purpose.

I have enclosed a completed Standing Order ☐ *Please tick*

SECTION 3: DONATIONS...

TUST are pleased to accept donations at any time. Please indicate your desire to make a donation in the space provided below.

I would like to make a donation to Torquay United Supporters' Trust in accordance with the aims and objectives of the trust (contained within its rules), and as the trust board in its sole discretion shall see fit. I wish to donate the sum of £.....

SECTION 4: SIGNATURE...

Please hand this form to a TUST board member or a designated member along with payment.

Or send the form to: **TUST (Membership), PO Box 476, Torquay, Devon. TQ1 9DG.**

Please make all cheques payable to: **Torquay United Supporters' Trust.**

I agree to abide by the rules of the trust, and I understand that should I breach these rules, my membership can be revoked.

SIGNED: ..... DATE: D D M M Y Y Y Y ☐☐☐☐☐☐☐☐

FOR TRUST USE ONLY:	Date renewal received:	/ /	Membership number:	Number:	New membership card mailed:	Tick