

Rugby Mosque Society

Rugby Mosque, Grosvenor Road, Rugby CV21 3LE

Membership Form

Personal Information

Full Name: _____

Date of Birth: _____

Gender: ☐ Male ☐ Female

Address: _____

Postcode: _____

Phone Number: _____

Email Address: _____

Membership Details

Do you wish to volunteer? ☐ Yes ☐ No

If yes please outline what kind of activities or tasks you could help with.

Declaration

I, the undersigned, confirm that the information provided above is accurate and true. I agree to abide by the rules and regulations of the Rugby Mosque Society I understand that my membership is subject to approval and can be revoked if I breach any of the organization's guidelines.

Signature: _____

Date: _____

Payment Details

Membership Fee: £15 per month

Payment Method: Bank transfer. Our banking details will be sent to you on acceptance of membership

☐ Yes, I want to Gift Aid my membership and any donations I make to Rugby Mosque Society. I am a UK taxpayer and understand that if I pay less Income or Capital Gains Tax than the amount of Gift Aid claimed, it is my responsibility to pay the difference.

Please notify us if you want to cancel this declaration, change your name or home address, or no longer pay sufficient tax.

For Office Use Only

Membership Approved By: _____

Date: _____

Membership Number: _____

Notes: _____

Privacy Notice: In order to comply with GDPR guidelines your personal data will be stored securely and used only for organizational purposes. We will not share your details with third parties without your consent.