Application for Membership of

CAI (Childhealth Advocacy International)

Yes, I want to join CAI and receive regular reports on the progress of the charity's work
TitleName
Current or previous medical or healthcare related position ?
Address
E-mail address
Telephone
I would like to set up a Bankers Order
☐ For an Annual Membership of £40 per year
☐ For a Reduced Rate Membership of £20 per year (Students, Retired and Unwaged)
To the Manager (Name and address of your bank)
Please credit CAI Acc no. 65033384 Branch No 08-92-50 with the sum
(in figures)
Debiting my account number
on/(date) or immediately on receipt of this order, whichever is the latest date
and thereafter each Month Year
Signature
OR I enclose a cheque for £(Please make cheques payable to "CAI")
OR I want to pay by VISA or MASTERCARD
Card number
Expiry date/lssue NumberDate of Isue/
Amount (in writing)Amount (figures)£

Signature....



www.caiuk.org



GIFT AID You can make this gift go even further if you are a UK tax-payer. Simply sign the declaration below and we can claim a further 28%.

I am a UK taxpayer , resident of the UK for tax purposes and that I will advise CAI if this situation changes. I understand that I must be paying an amount of Income Tax or Capital Gains Tax in the relevant year equal to any tax reclaimed by CAI.

Yes I am eligible for Gift Aid Signature :

(Further notes available on request)

Please return this form to:

CAI

Conway Chambers 83 Derby Road Nottingham NG1 5BB UI

Or to join over the telephone call **0115 9506662**

