**HASTINGS INTERNATIONAL PIANO CONCERTO COMPETITION**

**Charity Number 261351**

**Members and Patrons Application and Standing Order Form**

**ANNUAL SUBSCRIPTION RATES**

**Please select from the following options:**

Individual Member £30 Joint Members £50 Silver Patron(s) £100/£150

Gold Patron(s) £300/£500 Platinum Patron(s) £500/£750 Diamond Patron(s) £1001

Artistic Directors Circle £5000

**I/We wish to become a Member/Joint Members/Silver/Gold/Platinum/Diamond\* Patron(s)** **and wish/do not wish\* this support to be acknowledged in public** \**PLEASE DELETE WHERE APPLICABLE*

Name(s): ……………………………………………………………………………………………………………………………………

E-mail address: ………………………………………………… Tel. No: ……………………………………………………………

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

………………………………………………………………………………………………… Postcode: ……………………………….

 **GIFT AID** 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 the difference.

**Please send this form to the Treasurer, HIPCC, c/o White Rock Theatre, Hastings TN34 1JX**

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**STANDING ORDER FORM Please detach and send to your bank**

***FOR BANK USE ONLY: Please use the following reference when making payment:* MEMBERCUSTOMERSURNAME***……………………………………………………………………eg MEMBERSMITH*

Name(s): ……………………………………………………………………………………………………………………………………..

Address: ………………………………………………………………………………………………………………………………………

………………………………………………………………………………………………… Postcode: ……………………………….

Name of My Bank: ………………………………………………………………………………………………………………………

Address of Bank: …………………………………………………………………………………………………………………………

**Payments to be made to NatWest Bank plc for the credit of Hastings Music Festival HIPCC Account Sort Code : 60-10-15 Account Number: 87827638**

Date of first payment:\* \_ \_ /\_ \_ /\_ \_ and annually from then on unless cancelled by me.

Amount in £ …………………….. and words …………………………………………………………………………pounds.

Signature: ……………………………………………………………….Date: …………………………………………………………

\****PLEASE ALLOW ONE MONTH BEFORE FIRST PAYMENT***