

Application for Membership

I apply for membership of LUPUS UK and enclose my cheque/p.o. payable to 'LUPUS UK'

Title: Mr / Ms / Mrs First name:

Surname: Date of Birth:/...../.....

Address:..... Email:

..... Membership Fee: £.....

..... (plus donation if wished, thank you)

Postcode: Tel:.....

Annual Rates	
Single Membership	£10 pa
Double Membership **	£15 pa
Single Overseas Membership	£14 pa
Double Overseas Membership**	£19 pa
**both at same address	

- Please send me the **LUPUS UK Sales Brochure** (containing Christmas cards and gifts) in September each year.
- Please send me tickets for the **LUPUS UK Grand Draw** once a year so that I can help support the charity's fundraising.
- I am happy to be contacted by post and/or email in the future to inform me about **LUPUS UK fundraising events and/or appeals**.

GIFT AID DECLARATION

I wish LUPUS UK to treat any membership fees / donations made by myself as Gift Aid donations

Signature: Date:

I confirm I pay an amount of income tax and/or capital gains tax at least equal to the tax that the charity reclaims on my donations in the tax year (currently 25p per £1)

IF WISHING TO REMIT BY STANDING ORDER, PLEASE TELEPHONE FOR THE INSTRUCTION FORM

PLEASE COMPLETE RELEVANT SECTIONS OF THE FORM AND SEND TO THE ADDRESS BELOW

LUPUS UK

www.lupusuk.org.uk

St James House, Eastern Road, Romford, Essex RM1 3NH
Tel: 01708 731251

Patrons:

Lesley Collier CBE
Janet Dean
Professor Sir Peter Lachmann FRS

Gwyneth Strong
Paul Moriarty
Frances Curran

Director: Chris Maker ACIB
Reg Charity Nos. 1051610, SC039682

Hon Life President: Professor Graham RV Hughes MD FRCP
Hon Life Vice-President: Yvonne Norton MBE