

PERSONAL DETAILS - PLEASE COMPLETE ALL DETAILS

PLEASE USE BLOCK CAPITALS: New Member Renewal Additional Group Details changed

SURNAME FORENAME Title Mr/Mrs/ Miss/Ms

ADDRESS

POSTCODE

TEL NO () Ex-directory YES/NO MOBILE No EMAIL

Note: Ex-directory numbers will not be passed on to anyone else and will only be used by Gloucestershire Music

INSTRUMENT(S) GRADE(S) INSTRUMENTAL TEACHER(S)

**** ADDITIONAL DETAILS - PLEASE COMPLETE AND SIGN ****

By completing this form you are entering into a membership contract with us for one academic year (or part thereof) and you are therefore agreeing to us storing your data securely through our cloud based electronic administration system - Paritor Ensemble. We will never pass your information to a third party, or use it for any purpose other than to communicate with you about your membership and relevant information regarding your group(s). We only collect and process the necessary information needed to form the contract and to comply with legal obligations surrounding the safeguarding of our clients. To understand the full details of how we handle your data, please read our Privacy Policy by visiting <https://www.gloucestershiremusic.co.uk/about-us/privacy-policy/> or by requesting a copy from us.

We would also like to communicate with you about other opportunities and services provided by Gloucestershire Music and Make Music Gloucestershire, the County's Music Education Hub. All information is treated in accordance with the Data Protection Act (DPA) 1998 and GDPR Regulations 2018. Your email address is the only data information that will be stored securely through the GDPR compliant GovDelivery system and you will receive an infrequent e-newsletter around six times a year. Please indicate if you are willing to allow us to use your email address in this manner. You can unsubscribe from this service at any point.

GROUP

- | | |
|---|--|
| <input type="checkbox"/> Colwell Arts Jazz Ensemble | <input type="checkbox"/> Forest of Dean Area Wind Band |
| <input type="checkbox"/> Colwell Arts Jazz 2 Go | <input type="checkbox"/> Five Valleys Music Centre Learn As You Play |
| <input type="checkbox"/> Colwell Arts Orchestra | <input type="checkbox"/> Lakeside Concert Band Learn As You Play |
| <input type="checkbox"/> Lakeside Concert Band | <input type="checkbox"/> Brookfield Music Centre Learn As You Play |
| <input type="checkbox"/> Five Valleys Adult Wind Band | |
| <input type="checkbox"/> Gloucestershire Symphonic | |

FEES**

Joining in Sept/Oct 2019	<input type="checkbox"/>	£150
Joining in Nov/Dec 2019	<input type="checkbox"/>	£125
Joining in Jan/Feb 2020	<input type="checkbox"/>	£100
Joining in March 2020	<input type="checkbox"/>	£75
Joining in Apr/May 2020	<input type="checkbox"/>	£50
Joining in June/July 2020	<input type="checkbox"/>	£25

** Our annual fee of £150 allows you to attend as many adult music groups as you are eligible for. Each group/music centre guarantees a minimum of 30 sessions (2 of which may be performance opportunities e.g. 28 rehearsals and 2 concerts). Many groups/music centres offer additional performance opportunities for its members.

Methods of Payment:

By Credit/Debit Card: telephone 01452 330300

By Cheque/Postal Order: made payable to GCC and attached to this form.

By Standing Order: monies will be collected on 14th of each month. Mandates must be received by 1st of the month. The amount collected from your account will be divided into equal payments with the final one being collected in August 2020. This option is only available for applications up to and including March 2020. Please complete the enclosed form and return with your completed membership form.

N.B. Please do not set up your own standing order - without the correct forms we are unable to match payments to members or issue membership cards.

STANDING ORDER MANDATE

Please pay	Bank	Branch Title (not address)	Sort Code
	HSBC	GLOUCESTER, THE CROSS	40 - 22 - 09

For the credit of	Beneficiary's Name		Account Number					
	GLOUCESTERSHIRE COUNTY COUNCIL		1	1	6	0	0	0

FOR OFFICE USE ONLY	Member Name:								FOR OFFICE USE ONLY
	Group Name:								
	Commencing	Date and Amount of First Payment			and thereafter every	Due Date and Frequency			
		/	/	£	every	14th of each month			
	Instalments of	£			Until	Date and Amount of Last Payment			
Quoting Reference	/206863/82520				14 /08/2020	£			

This instruction cancels any previous order in favour of the beneficiary named above, under this reference

CUSTOMER DETAILS

Account Holder(s) Name(s) <i>please print</i>	Sort Code	Account Number

Signature(s) _____ Date _____

This Standing Order is in relation to membership fees for:
_____ <i>Please print</i>

Bank Name: _____

Address: _____

Post Code: _____

Note: The Bank will not undertake to

- (1) make any reference to Value Added Tax or other intermediate element.
- (2) advise payer's address to beneficiary.
- (3) advise beneficiary of inability to pay.
- (4) request beneficiary's banker to advise beneficiary of receipt of payment.

This form should be returned with your completed Music Group Membership Form to:
CMG, Gloucestershire Music,
Colwell Arts Centre, Derby Road, Gloucester. GL1 4AD.