



MEMBERSHIP APPLICATION FORM

Membership is only £5 per year!

Name (please print) _____

Address _____

Postcode _____ Tel _____ Email _____

I am a UK taxpayer and can Gift Aid this and all future donations Yes/No

Signed _____ Date _____

By completing this form you are consenting to receive information about YOPA's activities.

Please return your completed form to:

YOPA, St Sampson's Centre, Church Street, York, YO1 8BE

Please either pay by cheque (made payable to YOPA and sent to the above address with your form) or by BACS payment to:

Account Name: York Older People's Assembly

Sort Code: 30-99-50

Account No: 77997668

A receipt will be issued together with our warmest thanks.

Feel free to **contact us** with any questions by email:

yorkolderpeoplesassembly@outlook.com