



Maidstone Youth Music Society

Registered Charity Number 297018

MYMS APPLICATION AND CONTACT FORM

To: Richard Gretton, MYMS Manager, 16 Sycamore Crescent, Allington, Maidstone, ME16 0AG

[Please use BLOCK CAPITALS and delete as appropriate where *]

Surname.....Gender:

Forename(s).....

Date of birth Age on 1st September 2016:

Home address.....

.....

..... Postcode.....

School attended: Year Group [as in September 2016]

Name of parent(s)/carer(s).....

Home telephone number.....

Mobile number(s) for parent/carers.....

Home email address.....

Second email address

Instrument to be played at MYMS.....Approx Grade.....

Name of tutor..... [* Kent Music / School / Private]

Other instrument(s) played..... .Approx Grade.....

Name of tutor..... [* Kent Music / School / Private]

I am happy for my * son/daughter to join/rejoin MYMS and understand that regular and consistent attendance at rehearsals **and** concerts is required.

Signed..... Dated.....



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MYMS CONSENT FORM
[ALL STUDENTS]

Medical consent for
[Full name of student in BLOCK CAPITALS please]

In the event of an accident or illness, I ***do/do not** give permission for my ***son/daughter** to receive any medical attention which may be necessary, including anaesthetic and blood transfusion.

Please give details of any medical condition, allergies or treatment of which we should be aware.
[All this data will be stored in accordance with the Data Protection Act.]

.....
.....

Signed: **Date:**

Photographic consent for
[Full name of student in BLOCK CAPITALS please]

I ***do/do not** give permission for my ***son/daughter** to be included in photographs of MYMS students which may be used for publicity now or in the future.

Signed: **Date:**

MYMS FIRE DRILL
[ALL STUDENTS]

Fire Drill Information - for
[Full name of student in BLOCK CAPITALS please]

I confirm that I have discussed the MYMS fire drill information with my ***son/daughter**.

Signed: **Date:**



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I would like to claim the £10 reward for introducing to MYMS a new member who has paid his/her subscription.

The new member I introduced is [in CAPITALS]:

My name is [in CAPITALS]:

My instrument is: My MYMS ensemble is:

Signed: Date:

.....
Please hand this in to Richard Gretton, MYMS Manager

Checked by MYMS Membership Secretary:

Date £10 issued:

✂.....



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Gift Aid Declaration

Completing this form will allow MYMS to reclaim up to 25p in Gift Aid for every £1 you donate. Gift Aid is reclaimed from the tax you pay to HMRC for the current tax year.

In order to Gift Aid your donation you must tick the box below and complete the rest of this form:

I want to Gift Aid my current donation, any donations I have made in the past 4 years and all future gifts of money to MAIDSTONE YOUTH MUSIC SOCIETY

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 any difference.

Donor's details:

TitleFirst name or initial(s)

Surname

Full home address

.....Postcode

SignatureDate

MYMS Student(s)' Name:

Please return to: Peter Runting, MYMS Treasurer, via Richard Gretton, MYMS Manager, at MYMS

Please Note:

- You can cancel this declaration at any time by notifying MYMS.
- If in the future your circumstances change and you no longer pay tax on your income and capital gains equal to the tax that all charities reclaim, you can cancel your declaration.
- If you pay tax at the higher rate you can claim further tax relief in your Self-Assessment tax return.
- If you are unsure whether your donations qualify for Gift Aid tax relief, please ask us, or refer to the help sheet IR65 on the HMRC web site - www.hmrc.gov.uk
- Please notify us immediately if you change your name or address.