



TSA Member Profile

Membership number _____ (to be completed by the TSA)	_____ [web]
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Please return this completed form to Diane Sanson at: Tuberous Sclerosis Association, PO Box 12979, Barnt Green, Birmingham B45 5AN England or Fax: 0121 445 6970. *Please do not send it to any other address.* If you have difficulty paying, we can waive your subscription, just call 0121 445 6970.

Main contact name _____ Date of birth _____

Address _____ postcode _____

phone _____ mobile _____ Email _____

Person with TSC parent/carer professional _____ (please state) other relative/friend _____ (please state)

Signature _____ date _____

Family members at the same address (it helps us if we know your family details)

We need each person's permission to include their details on our database. Parents and carers can sign on behalf of under 18s and those unable to sign for themselves

Name 1. _____ TSC parent/carer other relative/friend
Signature _____ date _____ date of birth _____

Name 2. _____ TSC parent/carer other relative/friend
Signature _____ date _____ date of birth _____

Name 3. _____ TSC parent/carer other relative/friend
Signature _____ date _____ date of birth _____

Name 4. _____ TSC parent/carer other relative/friend
Signature _____ date _____ date of birth _____

Name 5. _____ TSC parent/carer other relative/friend
Signature _____ date _____ date of birth _____

Membership category (please tick box)

Full membership : £15 a year

New family/individual : Free for the first year

Residential care or supported living : Free

Organisations and professionals: £10 a year

Overseas: £20 a year (individual/family)

I do not wish to renew my membership

How would you like to receive information?

(a) Scan Magazine By post By email None

Organisations/ Professionals will be asked to subscribe to Scan but it is available to download free at www.tuberous-sclerosis.org

(b) Other information By post By email None

(c) TSC Research information By post By email None

Mailings (by email if possible) will be forwarded by the TSA and will only come from known and respected TSC researchers)

Data Protection

The TSA is a data controller under the Data Protection Act 1998. The personal data you have provided on this form and through contact with TSA support services staff will be used for administration and for statistical and other purposes connected with the TSA. Your details are not disclosed to third parties for marketing or other purposes not connected with TSC. Technical and organisational measures are taken to prevent unauthorised or unlawful processing or disclosure of information. You may request a copy of any data held on your membership record by writing to the Head of Administration. The TSA is a company limited by guarantee. On becoming a member, you will have voting rights at General Meetings, and are liable, in the event of the TSA's insolvency, to contribute not more than £1 to its liabilities.

TSA Membership Payment

Name:

Address:

.....

.....

Post code: Membership Number:.....
[to be inserted by TSA]

Membership Year 2009/10:
 *Subscription (due 1 July 2009) £ _____
 *Supplementary Donation £ _____
 Total payment £ _____

Payment method:

I have completed the Banker's Order form opposite

I enclose my cheque payable to the TSA

I would like to pay by credit card/switch card (and will contact Diane with my details on 0121 445 6970) .

Signed: Date:

Gift Aid Declaration:

I wish the TSA to treat as "Gift Aid" all subscriptions and donations I have paid for the past six years and all present and future such payments until I notify otherwise.

Signed: Date:

Note: For this declaration to be effective, you must pay UK income tax and/or capital gains tax at least equal to the amount of Gift Aid reclaimable by the TSA (currently 28p for every £1 you give). Please contact us if you cease to meet this requirement.

Standing Order/Banker's Order

Please note that standing orders are not available on all accounts. Please check with your bank/building society if in doubt.

To the Manager: Bank / Building Society

Bank address:

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Sort Code: Account number:

Please pay to:
 CAF Bank Ltd., 25 Kings Hill Avenue, Kings Hill, West Malling, Kent ME19 4JQ
 Sort Code: **40-52-40**
 For the credit of
 The Tuberous Sclerosis Association
 Account number: **00007047**
Quoting Reference:..... *[to be inserted by TSA]*

(a) *The sum of £.....
 (in words.....) **now;**

and
annually/quarterly/monthly thereafter until further notice.

**Please complete or delete as appropriate*

Signed: Date:

Name:

Address:

.....

.....

Post code:

This instruction replaces any previous order in favour of the Tuberous Sclerosis Association