



UK Independence Party Head Office

Please enter/update your personal details in BLOCK CAPITALS *denotes mandatory fields		Membership No. (If previously/existing member of the Party)	
Title*	First Name*	Surname*	Honours
Address*			
Town / City*		County*	Postcode*
Daytime Phone*		Evening Phone	Mobile*
Date of Birth*		Email*	
<p style="text-align: center;">If you can give any active help to UKIP, we would be grateful to know about it. Please tick ✓</p> Deliver leaflets <input type="checkbox"/> Display a sign at election <input type="checkbox"/> Assist local branch <input type="checkbox"/> Stand at elections <input type="checkbox"/>			

I want to JOIN/RENEW membership of the UK Independence Party. Please delete as applicable

SPECIAL MEMBERSHIP OFFER VALID UNTIL 31st MAY 2018

If you join or renew your UKIP membership before the 31st May 2018
you can do so for the special price of just **£20** (saving you £15 off the normal price)

Membership £20

Voluntary Donation £

Total Amount Payable £

UKIP is a non-racist party that welcomes all people who believe in the United Kingdom as a self-governing, democratic nation state. Signatories of this form accept the UKIP Constitution, its rules, terms and conditions. If an applicant later proves to be have been a member of an organisation proscribed by UKIP their application or membership may be revoked.

Instruction to your bank or building society to pay by Direct Debit



Name(s) of account holder(s)

Service user number

8	4	0	9	7	0
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Branch sort code

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Bank/building society account number

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Instruction to your bank or building society

Please pay UKIP Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee.

I understand that this Instruction may remain with UKIP and, if so, details will be passed electronically to my bank/building society.

Banks and building societies may not accept Direct Debit Instructions for some types of account.

Signature(s)

Date

Cheque/Credit Card Payment

I enclose a cheque payable to UKIP Please charge my credit/debit card Delete as applicable

Card number _____

Start date ___/___/___ Expiry date ___/___/___ Security code _____ (Last 3 digits) Issue no. _____ (Switch only)

Name as on account/card:

Card Type: [Visa, MasterCard, debit/credit] Signature:

I agree to abide by the UKIP Constitution and the Terms and Conditions of Membership (available to view at www.ukip.org).

UKIP reserves the right to reject applications or terminate memberships if these criteria are not met.

I the undersigned request that the UK Independence Party keep me fully informed of their Campaigning and other activities by email/postal communication.

Signature:

Date: