



The Field in Dunkeld is a place to grow vegetables by the community, for the community **MEMBERSHIP FORM 2026**

Dunkeld and Birnam Community Growing

SC042496

I would like to be a member of Dunkeld and Birnam @ the field also known as Dunkeld and Birnam Community Growing SCIO which is a Charitable Organisation.

NAME (s) : _____

ADDRESS: _____

SIGNATURE(s): _____

TELEPHONE: Home _____ Mobile _____

E-MAIL ADDRESS: _____

I give my permission for these details to be held on computer. They will not be shared with any other Organisation. YES _____ NO _____

I enclose my annual Membership Subscription for the period 1st February 2026 to 31st January 2027. This entitles you to vote at the AGM and gives you 20% discount on the produce.

ADULT £12.50 _____ YOUTH ASSOCIATE (Under 16) £5 _____

TWO OR MORE FAMILY MEMBERS AT THE SAME ADDRESS £25 _____

UNEMPLOYED £5 _____ PEOPLE WITH DISABILITIES £5. _____

Please make the cheque payable to Dunkeld and Birnam Community Growing SCIO

Or you can pay by BACS.

Our details are:

Bank of Scotland

Sort Code: 800657

Account Number: 06001186

Please use your name as a reference so we can identify the payment.

Use Gift Aid to make your donations worth more, including your membership payment. For every pound you give us, we earn an extra 25p from HM Revenue and Customs. It is that simple.

Please see over:

Sign me up for Gift Aid. Yes, please_____ No, thank you_____

Yes I want to Gift Aid any donations or membership donations I make in the future or have made in the past four years to Dunkeld and Birnam Community Growing. I am a UK taxpayer and understand 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.

Please notify Dunkeld and Birnam Community Growing if you want to cancel this declaration, change your name or home address, or no longer pay sufficient tax on your income and /or capital gains.

Photograph Release Form

I/We agree to being photographed only on the assurance that it will not be viewed other than in the context of the Field website or other Field Communications.

For children below the age of 16, the signature of a parent or guardian is also required.

Signature(s) _____

Please return form to:

Dave Amos
2 Water Wynd
Dunkeld PH8 0AP

For office use only

Membership fee received _____

Form of payment _____

Membership Number _____

Date admitted to membership_____

Gift Aid _____

Permission given for details to be held on Computer ____