You can also become a Criterion Friend by **filling in the membership form** below and **setting up a standing order with your bank.** You can do this on-line OR by printing off and completing the standing order form and sending it to your bank by post.



CRITERION FRIENDS MEMBERSHIP FORM				
My name				
My address				
Post code				
My e-mail address				
My preferred telephone number				
I am happy for my name to be included in Criterion Theatre programmes as a Criterion Friend Yes/No				
I have set up a standing order with my bank and have agreed to pay:				
£ per month OR £as an annual payment commencing on20				
Help us even more and turn every £1 you donate into £1.25				
In order to Gift Aid your donations you must tick the box below				
"I want to Gift Aid my donation and any donations I make in the future or have made since 8th June 2016 to: 'The Criterion Theatre, Earlsdon'				
"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."				
Your address is needed to identify you as a current UK taxpayer				
TitleFirst name or initial(s)Surname				
Home address				
Postcode				
Date				
Please notify us 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. Note: If you pay Income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your Self-Assessment tax return or ask HM Revenue and Customs to adjust your tax code.				

Please return this completed form to: Criterion Friends Secretary, Criterion Theatre,

Berkeley Road South, Earlsdon, COVENTRY, CV5 6EF

STANDING ORDER FORM



To the Manager,	Bank/Building Society		
Address:			
	Postcode:		
Sortcode:			

Please pay					
Account Name	'The Criterion Theatre, Earlso	don'			
Account Number	50550462				
Sort Code	60 - 07 - 40				
	commencing on the		20		
	indany/montiny until further noti	ce.			
Name of Account to be debited:					
Account Number:					
Signed:	Date:				