



The British Institute of Non-Destructive Testing

BENEVOLENT FUND

1 Spencer Parade, Northampton, NN1 5AA



Dear Member,

Welcome to the British Institute of Non-Destructive Testing. I am taking this opportunity to bring to your attention the excellent assistance which is available to members and their families from the Institute Benevolent Fund and to appeal to you to support the Fund by becoming a member.

The Fund was set up in 1989 to help members, ex-members and their dependants who were experiencing problems. The help provided could be in the form of advice, financial assistance or physical help.

A procedure was established which operates through the Institute Branches. Each Branch has appointed a Welfare Officer who initially assesses each request for help in their area and reports to the Benevolent Fund Board. The requests are considered by a panel set up by the Board and may be actioned the same day if the case is considered to be urgent. All cases are dealt with in strictest confidence and handled discreetly.

The Fund was originally established by a donation made by the Institute and now derives its income from the interest on its capital, donations from Branches and individuals and membership subscriptions.

The annual subscription to the Fund is £5 or life membership can be obtained for £40.

The Fund has provided much needed assistance to a lot of members and ex-members of the Institute and their dependants but to continue doing so requires more income.

I am asking you therefore to give serious consideration to becoming a member of the Fund or making a donation to the Fund by completing the tear-off slip below and returning it with your membership subscription.

Yours sincerely,

Peter Wallace
Chairman of the Benevolent Fund

I enclose a cheque for £..... made payable to BINDT Benevolent Fund

I wish to pay by direct debit. Please send details

I authorise you to debit my Mastercard Visa American Express Maestro*
account with the amount of £..... (£ sterling only)

Card No: ___/___/___/___ ___/___/___/___ ___/___/___/___ ___/___/___/___ Card security no: _____

Credit Card expiry date: ___/___ *Maestro payment: valid from: ___/___ to ___/___ issue no: _____

Name (as on credit card).....

Cardholder's address.....

..... Postcode.....

Signature..... MEMBERSHIP No.....