

Join our Lottery for your chance to win £1000

ST CLARE
HOSPICE

Mr/Mrs/Miss/Ms/other please specify _____	(office use only) membership number _____
Full Name _____	
Address _____	

Post Code _____ (essential information)	
Tel _____	Email _____

Please select your method of payment then complete the relevant section below indicating how many chances you want for each week and how many weeks you want to subscribe for. Each chance costs £1.00. Players must be over 16

Cheque / Postal Order Payment

I wish to buy _____ chance(s) each week for _____ weeks

I enclose a cheque/postal order to the value of £ _____ Please make payable to:
St Clare Hospice Lottery

Credit Card Payment (sorry at the present time we are unable to accept payment by debit card)

I wish to buy _____ chance(s) each week for _____ weeks

I authorise payment of £ _____

card number _____ expiry date _____ mm | yyyy

VISA / MASTERCARD (circle card type) name on card _____

authorised signature _____ date _____

Standing order mandate

To _____ Bank PLC sort code _____ / _____ / _____

branch _____

Account name _____ Acc no _____

Please debit my above account and send as per the following details:
HSBC Bank PLC, Gate house, The High, Harlow, Essex CM20 1LL.
Sort code 40-23-10 St Clare Lottery account no: 31381539

I wish to buy _____ weekly chance(s) and pay every 52 / 26 / 13 / 4 weeks (circle no of weeks)

(* calculate total value by multiplying number of weekly chances by number of weeks) * total £ _____

(specify date)

First payment no earlier than _____ Signed _____
and thereafter until further notice date _____

Please return your completed form to:
St Clare Hospice Lottery
FREEPOST ANG 2000
Harlow
Essex CM17 9ZZ

Lottery Office hours Monday - Friday 9.30am - 1.30pm
Tel: 01279 773730 fax: 01279 454011
email: lottery@stclare-hospice.co.uk

Registered Office: Stone Barton Essex CM17 9JX Registered in England no 2951374. Lottery Promoter: Richard Cowie
Registered with Epping Forest District Council License Number 210002410

