

EAST CHESHIRE HOSPICE LOTTERY

Application Form

Please complete the following details and return to the address below.

Name: _____ Mr / Mrs / Miss / Other

Address:

Postcode: _____ Telephone No: _____

I confirm I am 16yrs of age or older

If paying by cheque please send to the office enclosing a cheque for £13 £26 £52
(Payable to East Cheshire Hospice Lottery)

Standing Order Details (Please complete the mandate below)

To: _____

Bank Address: _____

Postcode: _____

Please pay: Royal Bank of Scotland Branch: Park Green, Macclesfield
Sort Code: 16-32-32 For Credit of: East Cheshire Hospice Lottery
Account No: 10002948 Quoting Reference: _____
For Office Use only: Date of 1st Payment: _____

Please pay the sum of £52 Annually £13 Quarterly £4.34 Monthly
(please tick an amount) until further notice from me/ us in writing.

Account to be debited: _____

Account Number: _____ Sort Code _____

Signature(s):

Date: _____

Please send your completed form to:

East Cheshire Hospice Lottery

Millbank Drive

Macclesfield

Cheshire

SK10 3DR

Data Protection

East Cheshire Hospice likes to keep in touch with its supporters. If you would prefer not to be contacted in the future please tick the box and return this form to the Hospice with details of your address.