# 2 simple ways to register:

complete the form below

call: 01204 663077

Please return this form to: Bolton Hospice Lottery Ltd, FREEPOST NWW5884A, Queens Park Street, Bolton BL1 4ZZ.
**No stamp is required, however if you decide to use one, more of your money can support the hospice.**

## Application Form

Title: Mr/Mrs/Miss/Ms/Other .....

Full Name: .....

Address: .....

.....Postcode:.....

Home Telephone: .....

Mobile: .....

Email: .....

I am over 16 ☐

**Each entry costs £1**
**How many times would you like to play?**

| 1 entry a week | 2 entries a week | 3 entries a week |
|---|---|---|
| ☐ £13/13 weeks | ☐ £26/13 weeks | ☐ £39/13 weeks |
| ☐ £26/26 weeks | ☐ £52/26 weeks | ☐ £78/26 weeks |
| ☐ £52/52 weeks | ☐ £104/52 weeks | ☐ £156/52 weeks |

## Payment by Cheque

(Minimum £13 for 13 weeks)

I enclose a cheque for £.....
made payable to Bolton Hospice Lottery Ltd.

## Payment by Credit/Debit cards

Please tick what frequency you would like:

☐ £13 Quarterly ☐ £26 Half yearly ☐ £52 Annually
☐ Automatically renew when due

Please debit my: ☐ Visa ☐ Mastercard ☐ Maestro
With regular payment until further notice (credit card only)

Card Number Maestro only

☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ ☐☐☐

Valid from M M Y Y Expiry date M M Y Y

Issue number (Maestro) ☐☐

Please state amount (minimum £13).....

Signature..... Date .....

We will not pass your details on to other organisations, however we would like to keep you informed of news and future events regarding Bolton Hospice. If you would rather not hear from us please tick the box. ☐

## Payment by Direct Debit

Please select below the frequency you wish to play then fill in the Direct Debit form below and send to Bolton Hospice Lottery.

| | | | How many? |
|---|---|---|---|
| Monthly | £4.34 | ☐ | ☐ |
| Quarterly | £13 | ☐ | ☐ |
| Half Yearly | £26 | ☐ | ☐ |
| Annually | £52 | ☐ | ☐ |

**Bolton Hospice Lottery Ltd**

DIRECT Debit

**Instruction to your Bank or Building Society**

Originator's Identification Number 2 5 4 3 4 0

Please fill in the form and send to:

**Bolton Hospice Lottery Ltd, FREEPOST NWW5884A, Queens Park Street, Bolton BL1 4ZZ.**

Name and full postal address of your Bank or Building Society
To: The Manager:

Bank/Building Society:

.....

Address:.....

.....Postcode:.....

Names of Account Holder(s):

.....

Branch Sort Code:

☐☐☐☐☐☐

Bank/Building Society account number:

☐☐☐☐☐☐☐☐

Reference (For Office use only):

.....

Instruction to your Bank or Building Society to pay by Direct Debit. Please pay Bolton Hospice Lottery Ltd Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with Bolton Hospice Lottery Ltd and, if so, details will be passed electronically to my Bank/Building Society.

Signature ..... Date .....

Banks and Building Societies may not accept Direct Debit Instructions for some types of account.