

## DERSINGHAM VILLAGE CENTRE LOTTERY APPLICATION FORM

Name .....

Address .....

.....

..... Postcode .....

Telephone .....

Email .....

I am aged over 16 and apply to become a member of the Dersingham Centre Lottery.

I understand that prizes may vary from month to month, according to the number of tickets sold.

I have read, understand and will abide by the rules.

### **Please tick ONE of the boxes below**

I enclose my payment of £60 (annual) payable to Dersingham Centre Association.

I enclose my payment of £15 (quarterly) payable to Dersingham Centre Association.

I have set up a standing order, or made a direct credit to Dersingham Village Centre. Account number 35847660 Sort code 30-98-97. I have referenced the payment with DVL/my surname, my initial. (e.g. DVLSmithJ)

Signature .....

Date .....

May we add you to our contact list and keep you updated on the project's progress and invite you to events? YES  NO

Any information, including personal details, will be held solely in connection with Dersingham Centre Association activities and will not be disclosed to a third party.

**Return to: Dersingham Centre Association, c/o 2a Post Office Road,  
Dersingham, PE31 6HP**