

Charity Name

Unique - Rare Chromosome Disorder Support Group



1 Your Details (please print in block capitals)

Title. First Name.

Surname.

Address.

Postcode.

Tel. Mobile.

D.O.B.  If you would like to receive correspondence via email, please tick here

Email.

2 Payment Frequency

How many entries would you like each week.

How often do you want to pay. (Please tick payment frequency & write amount in box)

Monthly / £4.34 Direct Debit Only

Every 13 Wks / £13

Every 26 Wks / £26

Every 52 Wks / £52

Total Payable

3 Select your Payment Method

Banks and Building Societies may not accept Direct Debit instructions for some types of account. DD15

Direct Debit

Please fill in the form and return to Unity. Name and Full postal address of your Bank or Building Society.



Instruction to your Bank or Building Society to pay by Direct Debit



To. The Manager Bank / Building Society

Address.

Postcode

Service User Number

Reference.

Instruction to your Bank or Building Society

Please pay Unity 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 Unity and, if so, details will be passed electronically to my Bank / Building Society.

Name(s) of Account Holder(s)

Branch Sort Code.

Bank / Building Society account number

Signature.

Date.

Payment by Cheque

I enclose a Cheque made payable to Unity (minimum payment £13)

4 Your Consent to Play (I confirm I am over 16 and resident in G.B.)



For office use only.

Signature.

Date.

If you would prefer not to receive other forms of communication from your chosen society, please tick here

The Unity Lottery  
Freepost RLZR - GSYJ - KSZA  
BARROW-IN-FURNESS  
LA14 2PE