Cause name:

Epsom and St Helier Hospitals Charity

Charity number: 1049197

This lottery is licenced by:

Epsom Council and Sutton Council

Lottery licence number:

Epsom: 555

Sutton: 19/00623/GSSLR

The promoter of this lottery is:
Sasha Phillips
Epsom and St Helier Hospitals Charity
Epsom Hospital
Dorking Road
Epsom, KT18 7EG

Title:	First Name	:	How many entries would you (Each entry costs £1 per wee		
Surname:			(
Address:				Monthly / £4.34 Direct Debit only	X
			How often do you	Every 13 wks / £13	
	Postcode:		want to pay? (Please tick payment frequency & write	Every 26 wks / £26	
Tel:	Mobile:		amount in box)		
D.O.B:				Every 52 wks / £52	=
Email:				Total amount payable:	
If you do not wis	sh your name to be	publicised if you win, please tick here			
If you would like	to receive lottery	correspondence via email, please tick here			
Payment by			instructions for some types Inst	ruction to your Bank or Building	Direction
Payment by Please fill in the form	Direct Debit and return to Unit		instructions for some types UNITY Inst Soci	of accounts cruction to your Bank or Building lety to pay by Direct Debit	Direct
Payment by Please fill in the form Name(s) of Account	Direct Debit and return to Unit		instructions for some types Unity Inst Soci Service User Number: Reference:	of accounts cruction to your Bank or Building	Direction of the boundary of t
Payment by Please fill in the form Name(s) of Account Branch Sort Code:	Direct Debit and return to Unit Holder(s):	y	instructions for some types Unity Inst Soci	of accounts cruction to your Bank or Building lety to pay by Direct Debit	
Payment by Please fill in the form Name(s) of Account Branch Sort Code: Bank/Building Societ	Direct Debit n and return to Unit Holder(s): y account number:	y	instructions for some types Unity Inst Soci Service User Number: Reference: (For office	of accounts cruction to your Bank or Building lety to pay by Direct Debit	
Payment by Please fill in the form Name(s) of Account Franch Sort Code: Gank/Building Societ Instruction to your Please pay Unity from	Direct Debit and return to Unit Holder(s): y account number: Bank or Building Son the account deta	y ociety iled in this instruction subject to	Instructions for some types Inst Soci Service User Number: Reference: (For office use only)	of accounts cruction to your Bank or Building lety to pay by Direct Debit	
Payment by Please fill in the form Name(s) of Account Granch Sort Code: Grank/Building Societ. Instruction to your lease pay Unity from the safeguards assum this instruction may be	Direct Debit and return to Unit Holder(s): y account number: Bank or Building Son the account deta ed by the Direct Deremain with Unity	y ociety illed in this instruction subject to bit Guarantee. I understand that and, if so, details will be passed	Instructions for some types Inst Soci Service User Number: Reference: (For office use only)	of accounts cruction to your Bank or Building lety to pay by Direct Debit	
Payment by Please fill in the form Name(s) of Account Granch Sort Code: Grank/Building Societ Grantruction to your lease pay Unity from the safeguards assum this instruction may the	Direct Debit and return to Unit Holder(s): y account number: Bank or Building Son in the account deta ed by the Direct De remain with Unity a Bank/Building Socio	pciety icled in this instruction subject to bit Guarantee. I understand that and, if so, details will be passed ety.	Instructions for some types Inst Soci Service User Number: Reference: (For office use only) Signature:	cruction to your Bank or Building lety to pay by Direct Debit 4 2 1 1	
Payment by Please fill in the form Name(s) of Account Branch Sort Code: Bank/Building Societ Instruction to your P Please pay Unity from the safeguards assurthis instruction may belectronically to my Belectronically to my E	Direct Debit and return to Unit Holder(s): y account number: Bank or Building Son in the account deta ed by the Direct De remain with Unity a Bank/Building Socio	pciety icled in this instruction subject to bit Guarantee. I understand that and, if so, details will be passed ety.	instructions for some types Inst Soci Service User Number: Reference: (For office use only) Signature: Date:	cruction to your Bank or Building lety to pay by Direct Debit 4 2 1 1	
Payment by Please fill in the form Name(s) of Account Granch Sort Code: Grank/Building Societ Granth	Direct Debit and return to Unit Holder(s): y account number: Bank or Building Son the account deta ed by the Direct De remain with Unity : Bank/Building Socio	pociety illed in this instruction subject to bit Guarantee. I understand that and, if so, details will be passed ety. I enclose a Cheque made payable	instructions for some types Inst Soci Service User Number: Reference: (For office use only) Signature: Date: Date: 5. Your consent to p	cruction to your Bank or Building lety to pay by Direct Debit 4 2 1 1	0 2
Payment by Please fill in the form Name(s) of Account Franch Sort Code: Franch Sort	Direct Debit and return to Unit Holder(s): y account number: Bank or Building So the account deta ed by the Direct De remain with Unity Bank/Building Socio	pociety Iled in this instruction subject to bit Guarantee. I understand that and, if so, details will be passed ety. I enclose a Cheque made payable	instructions for some types Unity Inst Soci Service User Number: Reference: (For office use only) Signature: Date:	cruction to your Bank or Building lety to pay by Direct Debit 4 2 1 1	
Payment by Please fill in the form Name(s) of Account Granch Sort Code: Gank/Building Societ Granch Sort Code: Granch So	Direct Debit and return to Unit Holder(s): y account number: Bank or Building Son the account deta ed by the Direct De remain with Unity (sank/Building Socie Cheque	pociety illed in this instruction subject to bit Guarantee. I understand that and, if so, details will be passed ety. I enclose a Cheque made payable ceive updates from	instructions for some types Inst Soci Service User Number: Reference: (For office use only) Signature: Date: Date: 5. Your consent to p	cruction to your Bank or Building lety to pay by Direct Debit 4 2 1 1	0 2
Payment by Please fill in the form Name(s) of Account Granch Sort Code: Grank/Building Societ Grank/Building S	Direct Debit and return to Unit Holder(s): y account number: Bank or Building Son the account deta ed by the Direct De remain with Unity Bank/Building Socio Cheque t preferences ou would like to rec	pociety Iled in this instruction subject to bit Guarantee. I understand that and, if so, details will be passed ety. I enclose a Cheque made payable beive updates from	Instructions for some types Inst Soci Service User Number: Reference: (For office use only) Signature: Date: Date: 5. Your consent to pure to for the confirm I am over 16 and the consent to pure to for the confirm I am over 16 and the consent to pure to for the confirm I am over 16 and the consent to pure to for the confirm I am over 16 and the consent to pure the confirm I am over 16 and the consent to pure the confirm I am over 16 and the	cruction to your Bank or Building lety to pay by Direct Debit 4 2 1 1	0 2
Payment by Please fill in the form Name(s) of Account Branch Sort Code: Branch Sort	Direct Debit and return to Unit and return to Unit Holder(s): y account number: y account number: Bank or Building So in the account deta ed by the Direct De remain with Unity a Bank/Building Socio Cheque t preferences ou would like to rea	pociety illed in this instruction subject to bit Guarantee. I understand that and, if so, details will be passed ety. I enclose a Cheque made payable ceive updates from No	Inst Soci Service User Number: Reference: (For office use only) Signature: Date: 5. Your consent to public of the service	cruction to your Bank or Building lety to pay by Direct Debit 4 2 1 1	0 2
Payment by Please fill in the form Name(s) of Account Branch Sort Code: Bank/Building Societ Instruction to your lelease pay Unity fror the safeguards assurthis instruction may is electronically to my E	Direct Debit and return to Unit Holder(s): y account number: Bank or Building Son the account deta ed by the Direct De remain with Unity Bank/Building Socio Cheque t preferences ou would like to rec	pociety Iled in this instruction subject to bit Guarantee. I understand that and, if so, details will be passed ety. I enclose a Cheque made payable beive updates from	Instructions for some types Inst Soci Service User Number: Reference: (For office use only) Signature: Date: Date: 5. Your consent to pure to for the confirm I am over 16 and the consent to pure to for the confirm I am over 16 and the consent to pure to for the confirm I am over 16 and the consent to pure to for the confirm I am over 16 and the consent to pure the confirm I am over 16 and the consent to pure the confirm I am over 16 and the	cruction to your Bank or Building lety to pay by Direct Debit 4 2 1 1	0 2

Freepost RLZR-GSYJ-KSZA
The Unity Lottery
Furness Gate
Peter Green Way
Furness Business Park
BARROW-IN-FURNESS
LA14 2PE

The **Unity** Lottery, Barrow-in-Furness
T 0370 050 9240 E info@unitylottery.co.uk
W unitylottery.co.uk

Unity is operated by Sterling Management Centre Ltd, registered as an External Lottery Manager by the Gambling Commission under the Gambling Act 2005 - www.gamblingcommission.gov.uk