Cause name:

Neuro Therapy Centre

Cause registration number:

700904

This lottery is licensed by: Flintshire County Council Licence reference: SL0066

The promoter of this lottery is: Neuro Therapy Centre, Saltney, Flintshire. CH4 8RG

Tieles	Firms N				
Title:	First Name	:	How many entries would you (Each entry costs £1 per we		
Surname:			- (Lacirentity Costs &1 per wee		
Address:			Monthly / £4.34 Direct Debit only	x	
			How often do you want to pay?	Every 13 wks / £13	
	Postcode:		(Please tick payment frequency & write amount in box)	Every 26 wks / £26	
Tel:	Mobile:		amountmooxy		
D.O.B:				Every 52 wks / £52	=
Email:				Total amount payable:	
If you do not wi	ish your name to be	publicised if you win, please tick here			
If you would like	e to receive lottery	correspondence via email, please tick her	re		
Payment by Please fill in the form			instructions for some types Inst	s may not accept Direct Debit of accounts cruction to your Bank or Building iety to pay by Direct Debit	DIRE
Payment by Please fill in the form Name(s) of Account Branch Sort Code:	Direct Debit In and return to Unit t Holder(s):		Instructions for some types Inst Soci Service User Number: Reference: (For office use only)	of accounts cruction to your Bank or Building	
Payment by Please fill in the form Name(s) of Account Branch Sort Code: Bank/Building Societ Instruction to your Please pay Unity fro the safeguards assuithis instruction may	ty account number: Bank or Building Somethe account detailed by the Direct Decremain with Unity are	pciety Iled 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	of accounts ruction 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 Instruction to your Please pay Unity fro the safeguards assuithis instruction may	ty account number: Bank or Building Some the Direct De land and with Unity a Bank/Building Socies	ociety Iled 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:	of accounts cruction to your Bank or Building liety 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 Please pay Unity fro the safeguards assuithis instruction may electronically to my Payment by	Direct Debit In and return to Unit It Holder(s): ty account number: Bank or Building Som the account detaired by the Direct Deiremain with Unity a Bank/Building Socie	pociety led in this instruction subject to bit Guarantee. I understand that und, if so, details will be passed ety. I enclose a Cheque made paya	Instructions for some types Inst Soci Service User Number: Reference: (For office use only) Signature: Date:	of accounts ruction to your Bank or Building liety to pay by Direct Debit 4 2 1 1	
Payment by Please fill in the form Name(s) of Account Branch Sort Code: Branch Sort	Direct Debit mand return to Unit t Holder(s): ty account number: Bank or Building So m the account detai red by the Direct De remain with Unity a Bank/Building Socie Cheque	pociety led in this instruction subject to bit Guarantee. I understand that and, if so, details will be passed ety. I enclose a Cheque made paya	instructions for some types Inst Soci Service User Number: Reference: (For office use only) Signature: Date:	of accounts ruction to your Bank or Building liety to pay by Direct Debit 4 2 1 1 33)	
Payment by Please fill in the form Name(s) of Account Branch Sort Code: Brank/Building Societ Instruction to your Please pay Unity fro the safeguards assurbis instruction may electronically to my Payment by 1. Your contact Please indicate how	Direct Debit mand return to Unit t Holder(s): ty account number: Bank or Building So m the account detai red by the Direct De remain with Unity a Bank/Building Socie Cheque	pociety led in this instruction subject to bit Guarantee. I understand that and, if so, details will be passed ety. I enclose a Cheque made paya	Instructions for some types Inst Soci Service User Number: Reference: (For office use only) Signature: Date: 5. Your consent to pure to form of the pure to unity (I confirm I am over 18 and	of accounts ruction to your Bank or Building liety to pay by Direct Debit 4 2 1 1 33)	0 2
Payment by Please fill in the form Name(s) of Account Branch Sort Code: Branch Sort	Direct Debit mand return to Unit t Holder(s): ty account number: Bank or Building So m the account detai red by the Direct De remain with Unity a Bank/Building Socie Cheque	pociety led in this instruction subject to bit Guarantee. I understand that and, if so, details will be passed ety. I enclose a Cheque made paya	Instructions for some types Inst Soci Service User Number: Reference: (For office use only) Signature: Date: ble to Unity (minimum payment £1	of accounts ruction to your Bank or Building liety to pay by Direct Debit 4 2 1 1 33)	0 2
Payment by Please fill in the form Name(s) of Account Branch Sort Code: Bank/Building Societ Instruction to your Please pay Unity fro the safeguards assurthis instruction may electronically to my Payment by 1. Your contact Please indicate how your chosen cause:	tholder(s): ty account number: Bank or Building Somethe account detained by the Direct Deremain with Unity a Bank/Building Society Cheque	pociety led in this instruction subject to bit Guarantee. I understand that und, if so, details will be passed ety. I enclose a Cheque made paya	Instructions for some types Inst Soci Service User Number: Reference: (For office use only) Signature: Date: 5. Your consent to pure (I confirm I am over 18 and Signature:	of accounts ruction to your Bank or Building liety to pay by Direct Debit 4 2 1 1 33)	0 2
Payment by Please fill in the form Name(s) of Account Branch Sort Code: Bank/Building Societ Instruction to your Please pay Unity fro the safeguards assu this instruction may electronically to my	Direct Debit In and return to Unit It Holder(s): Ity account number: It Bank or Building So In the account detained by the Direct De Iremain with Unity It Bank/Building Socie It Cheque It preferences It you would like to recovery	pociety led in this instruction subject to bit Guarantee. I understand that und, if so, details will be passed bity. I enclose a Cheque made paya beive updates from	Instructions for some types Inst Soci Service User Number: Reference: (For office use only) Signature: Date: 5. Your consent to pure to form of the pure to unity (I confirm I am over 18 and	of accounts ruction to your Bank or Building liety to pay by Direct Debit 4 2 1 1 33)	

.ՍլուկՍՍԱԿ|Մ-կուդՍբ|իգուկ|

Freepost RLZR-GSYJ-KSZA
The Unity Lottery
Furness Gate
Peter Green Way
Furness Business Park
Barrow-in-Furness
LA14 2PE

Need assistance? Get in touch:

Tel: 0370 050 9240 | **Email:** info@unitylottery.co.uk **Web:** www.unitylottery.co.uk

Unity is operated by Sterling Management Centre Limited. Sterling Management Centre is licensed and regulated in Great Britain by the Gambling Commission under account number 3137.

Gamble Aware

Need support on problem gambling? Visit **begambleaware.org**