

Stockleigh Pomeroy Lottery

Membership Form



Monthly lottery £1 per ticket. Please print off and complete below.

Name: _____
Address: _____ _____
Email: _____ Postcode: _____
Telephone Number: _____
Number of Tickets: _____ @ £1 X _____ months
TOTAL = £ _____
I declare I am over 18 years old & all details to my knowledge are correct Signature: _____ Date: _____

**Please return booking & monies to Emma Hill @ Lower North
Coombe, Stockleigh Pomeroy EX17 4BH**

Office Use:	Date received: _____
	Paid by CASH/CHEQUE/Standing Order: £ _____
	Lottery Number/s = _____