



Lottery Membership Application

Direct Debit

Please return your completed form (with cheque if applicable) to FREEPOST AIR AMBULANCE PROMOTIONS (no stamp or other address details required).

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



Service User Number

6 8 3 8 7 6



1. Your Details (PLEASE PRINT IN BLOCK CAPITALS)

Mr/Mrs/Miss/Other _____ First name _____

Surname _____

Address _____

_____ Postcode _____

Telephone _____

Email _____

I confirm that I am 16 years of age or over

Signature _____

Name(s) of Account Holder(s)

Bank/Building Society Account Number

Branch Sort Code

Name and full postal address of your Bank or Building Society

To: The Manager
Address
Postcode

Reference Number

2a. Regular Lottery

I would like to purchase _____ chance(s) per week in the Regular Lottery.

If you now wish to join our Superdraw, please complete section 2b. If you only wish to join the Regular Lottery, please go straight to section 3.

Upon joining, you will receive a membership pack detailing you lucky numbers, along with an air ambulance car sticker.

2b. Superdraw

I have purchased _____ weekly chance(s) in the Regular Lottery and would also like to purchase _____ chance(s) in the Superdraw. (For every chance you have in the Regular Lottery you may, if you wish, have one chance in the Superdraw.)

3. Your Payment

Your total payment is £1 per week for each chance in each lottery so if you have one chance in the Regular Lottery and one chance in the Superdraw, your total payment is £2 per week.

Cheque/Postal Order (suggested minimum 26 weeks)

I enclose a cheque for £ _____

Please make cheque payable to 'Air Ambulance Promotions Ltd'.

For Air Ambulance Promotions Ltd Official Use Only

This is not part of the Instruction to your Bank or Building Society

Each chance in each lottery costs £1 per week

I wish to buy _____ chance(s) each week in the Regular Lottery and pay:

4-Weekly Quarterly Annually

I would also like to buy _____ chance(s) each week in the Superdraw

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

Please pay Air Ambulance Promotions Ltd Direct Debits 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 Air Ambulance Promotions Ltd and, if so, details will be passed electronically to my Bank/Building Society.

Signature(s)
Date

Banks and Building Societies may not accept Direct Debit Instructions from some types of account.



Registered Charity Number: 1021367

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