**The Lions Monthly Lottery**

The Lions monthly lottery has been set up as a lottery and licenced by Southend on Sea Council. Any person entering has confirmed that they are over the age of 18 although numbers may be purchased for the benefit of someone under that age. If you are entering part way through the year please allow one month for processing of payment (pro rata accordingly), And for payment of first payment to be received. The monthly draw will take place at the second lions meeting of every month.

**Standing Order Mandate**

**Please complete in block capitals**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| To Sort Code ----------------------------------------------Bank  |  | **-** |  | **-** |  |

|  |
| --- |
| **(Full address)** |

1. **Customer’s details**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Account name Account number** |  |  |  |  |  |  |  |  |

|  |  |
| --- | --- |
| **Tel No. Work** | **Tel No. Home** |
| **e.Mail** | **My address:-** |

**I**

**Please set up the following Standing Order and debit my/our account accordingly. I also confirm that I am over the age of 18. ---------**

1. **Person / Organisation you wish to pay**

|  |
| --- |
| **Name – Southend on Sea Lions Club****Bank – TSB Bank PLC, Leigh on Sea, Essex** |
| **Account number - 00900026 Sort Code - 30-94-26** |

|  |
| --- |
| **Reference to be quoted / draw numbers –****Completed by Southend on Sea Lions**  |

1. **About the payment - Account details**

|  |  |
| --- | --- |
| **Amount of first payment (if different) £** | **Amount of normal payment £12.00** |

|  |
| --- |
| **Amount of normal payment in words – Twelve pounds.** |
| **Amount of final payment (if different) – N/A** |

**When Paid (Please note. Payment made to an account held at Nat West will normally be received by the beneficiary on the nominated payment date. Payment to an account held at a different bank will be received by the beneficiary 3 working days after your nominated payment date).**

|  |  |
| --- | --- |
| **Day or Date of payments Frequency****(e.g. Friday, 1st, 31st May)** | **Frequency - Yearly** |

|  |
| --- |
| **Commencing Now then on the !st July annually**  |

|  |  |  |
| --- | --- | --- |
|  **N/a****Total number of payments…………** |  **N/A****or expiry date…………………** |  **X****Or Until Further Notice…………** |

|  |  |
| --- | --- |
| 1. **Confirmation**

**I/We acknowledge the bank will not undertake to:****(ii)Make any reference to VAT, or other indeterminate element.****(iii)Advise payer’s address to beneficiary****(iv)Advise beneficiary of inability to pay****(v)Request beneficiary’s banker to advise beneficiary of receipt.** | **Bank Use Only****Keyed by (initials)****Date………………………….** |

**Customer(s) Signature(s)……………………………………………………. Date………………….**

**Please Send Completed form to Lion R Fuller at**