I hereby apply for membership of **THE DFC WARBLER LOTTERY**

Name					
Address Line 1					
Address Line 2					
Town			County	25 1	
Post Code		400 000			
Telephone No.		Proc. 10. 10.	Mobile No.		
E-mail Address		B 100 - 100 - 10			
		M. Tellina William	_		
	n.	E-207 Per		HOW MANY NUMBERS?	
ANNUAL SUBSCRIPT	ION	I wish to make a single payment of £60 per subscription number (Please make cheques payable to 'DFCSA')			
(£60 per subscription nu	ımbar)	I have made a direct payment of £60 per subscription number from my bank account quoting the			
	. Thave made a	Reference Number(s) indicated below.			
MONTHLY SUBSCRIPT (£5 per number per mont minimum of 12 month	h for a (Please comp	I wish to pay by standing order an amount of £5.00 per month per number (Please complete by standing order mandate below or set up your standing order via internet banking)			
Completed Forms should	ub updates and newsletters from	Dartford FC Lottery, Champions Bar, Pr	do not wish to receive any corresponder inces Park, Grassbanks, Da		
To: The Manager		Bank			
10. The Manager		Dum			
Address:					
- 6			70.0	7	
Please pay	Bank	Branch Title (not address)	Sort Code N	Sort Code Number	
	Nat West Bank			.6	
	Beneficiary's Name		Account Number		
	Dartford Football Club Supporters Association		51325691		
	Amount in Figures *		Amount In Words *		
	£	* minimum amount £5.00			
		Access to			
	Date & An	nount Of First Payment *		Due Date & Frequency	
		C		On The First Day Of	
Commencing		£	And Thereafter every On The First Day Every Month		
	Date & Amount Of First Payment *				
	Until Further Notice	£			
Reference Number					
200	and debit my/our a	ccount accordingly	ACC ACC		
This instruction conce	le any provious order	in favour of the handician, non	mad above under this ref	orongo	
This instruction cance	is any previous order	in favour of the beneficiary nar	neu above, under tins rei	erence	
Special Instructions					
Special Histiluctions					
Account to Do Dobited	Sort C	Todo Account N	dumbor		
Account to Be Debited	Sort C	ode Account N	Number		
Account to Be Debited	Sort C	ode Account N	Number		

Note: The Bank will not undertake to (i) Make any reference to Value Added Tax or other indeterminate element, (ii) Advise payer's address to beneficiary, (iii) Advise beneficiary of inability to pay, (iv) Request beneficiary's banker to advise the beneficiary of receipt of payment.