



## REGISTRATION FORM

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Paying by: Standing Order  Cheque  Cash  Please cross appropriate box

I/We would like to buy \_\_\_\_\_ numbers (£12 each)

I/We wish to donate my/our winnings back to the **100CLUB** fund

Please cross this box if you wish to do so

Signature: \_\_\_\_\_

### ADMINISTRATION USE ONLY

SO received:

Number allocated: \_\_\_\_\_

Date joined: \_\_\_\_\_