

**Membership Application Form**

**YOUR CHANCE TO WIN A CASH PRIZE EVERY MONTH**

|  |  |
| --- | --- |
| Name |  |
| Address: |  |
| Email: |  |
| Tel No: |  |
| State number of shares per month @ £5 each |  |
| Total Monthly Payment |  |
| Membership Start Date*Please insert the date you would like your membership to begin!* |  |
| Please tick box:I confirm I am 16 years of age or over:I confirm that I have read and agree to the Terms and Conditions: |
| Signed: | Date: |
| **Method of payment:*** Set up monthly standing order with your bank:

You will be entered into the draw of the month from which the first payment is received.The draw will be conducted at the end of every month.**Standing order details:**Account Name: Sefton Women’s and Children’s AidSort Code: 60-09-13Account Number: 97663581*\*Please note that we cannot accept monthly cash/cheque payment for this scheme\** |
| Please complete and return to: fundraising@swaca.com |
| **Office Use:**No. of Shares per month Numbers Allocated:Added to Database & Notified: YES/NO Date Form Received |