

100 Club Application Form

Subscription for: _____ number(s) (maximum of 4 per household)

Name: _____

Address: _____

(This is the address where we will send your winnings should you win)

I/we understand that Central Staffs Conservatives will forward the completed Standing Order Mandate to the bank indicated and that £4.34 will be taken from my/our account on the first of each month/or a sum of £52 to be paid annually via Standing Order and paid into the Federation bank account until I/we advise the bank otherwise. Alternatively, please enclose a cheque for £52 with your completed forms.

I/we agree that if we wish to cancel this order I/we will also inform **Central Staffs Conservative Federation** of this decision.

Signature: _____ Date: _____

Please return this form to:
Central Staffs Conservatives, Castle Street, Stafford ST16 2ED together with your Standing Order Mandate so we can process your subscription application.

THANK YOU FOR YOUR SUPPORT AND GOOD LUCK!

Your data will be used by the Central Staffordshire Conservative Federation as part of our democratic engagement with electors. Where necessary, your data will be shared with Conservative Party Headquarters, our candidates and elected representatives.

It will not be given or sold to anyone else. For more information, please see our privacy notice available at www.centralstaffsconservatives.org/privacy

Stafford Borough Council Lottery Licence LL1/2203

Promoted by Duncan Sandbrook on behalf of Central Staffordshire Conservative Federation, both at Castle Street, Stafford ST16 2ED

Standing Order Mandate

To: _____ The Manager

Your Bank Name: _____

Your Bank Address: _____

Bank Postcode: _____

Please pay Lloyds Bank, Market Square, Stafford ST16 2JL

For the credit of: **Central Staffs Conservative Federation**

Sort Code **30-98-00** Account No: **00449122**

The sum of: **£4.34 (monthly)** **£52 (annually)**

Other _____ **monthly/annually (delete as applicable)**

Please chose a monthly or annual subscription (tick as appropriate)

Monthly Subscriptions: Please pay the **monthly** amount indicated above immediately on receipt of this request, then please pay the monthly amount indicated, starting on the 1st day of the following month and on the 1st day of each following month until further notice.

Annual Subscriptions: Please pay the **annual** amount indicated above immediately on receipt of this request, then please pay the annual amount indicated starting on the 1st day of the month 12 months from today's date and annually, until further notice.

Payment reference:

(Insert your surname and initial) **100/**_____

Name of account holder: _____

Sort Code: _____ Account No: _____

Signed: _____ **Date:** _____

Address _____

Telephone No: _____

Please return both parts of this form to:
Central Staffs Conservatives, Castle Street, Stafford ST16 2ED