

GOLD BOND WEEKLY DRAW in aid of KENDAL TOWN FC

PLEASE COMPLETE and RETURN TO:

Kendal Town FC, Lakeland Radio Stadium, Parkside Road, Kendal, Cumbria, LA9 7BL

Name:

Address:

..... Post Code:

Telephone Number (for prize winning purposes):

Email Address (to receive our weekly results email)

YOUR BANK DETAILS

Name of Bank / Building Society:

Address:

..... Post Code:

YOUR ACCOUNT DETAILS

Name of Account: _____

Sort Code _____ Account Number _____

I hereby confirm I wish to join the Gold Bond weekly draw and agree to pay in instalments of: (please tick)

£13.00 a quarter (1 entry per week) £52.00 a year (1 entry per week)

£26.00 a quarter (2 entries per week) £104.00 a year (2 entries per week)

I confirm that I am aged 16 or over.

Signed: Date:

OFFICE USE ONLY

Reference Number: _____

Date of First Payment: _____

Method of Payment: _____

<p>Please process the above standing order to the following account: Account Name: GOLD BOND WEEKLY DRAW Account Number: 91854873 Sort Code: 60-19-38 Please include the reference number on all payments</p>
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