



www.pssa.org.uk

LOTTERY FORM

Please complete all relevant sections **IN FULL** using **BLOCK CAPITALS**

Title	<input type="text"/>	First Name	<input type="text"/>	Initials	<input type="text"/>
Surname	<input type="text"/>	Date of Birth	<input type="text"/>		
Male	<input type="checkbox"/>	Female	<input type="checkbox"/>	Mothers Maiden Name	<input type="text"/>

(Identification purposes only)

1. New Lottery Member

Please tick the relevant box to indicate the number of tickets you require or enter the exact amount in the final box.
NB. The maximum monthly holding is 20 tickets i.e. £20

Tick	Number of £1 tickets	Monthly Deduction
<input type="checkbox"/>	1	£1
<input type="checkbox"/>	2	£2
<input type="checkbox"/>	3	£3
<input type="checkbox"/>	4	£4
<input type="checkbox"/>	5	£5
<input type="checkbox"/>		£

2. Existing Lottery Member

Please increase / decrease my monthly holding of lottery tickets as indicated
(Enter NIL under 'Number of £1 tickets' and 'New amount' if you wish to withdraw from the scheme)

3. To be completed in all cases (only if applying or amending)

Tick	Number of £1 tickets	New Amt. Monthly Deductions
<input type="checkbox"/>	<input type="text"/>	£ <input type="text"/>

Establishment / Branch / Division	<input type="text"/>
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National Insurance Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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National Insurance number can be found on your pay/pension slip

Commencement Date	<input type="text"/>
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Signature	<input type="text"/>	Date	<input type="text"/>
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