

ORDER FORM

Delivery Name & Address

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.....

.....

..... Post Code

Contact Tel No..... Fax No

Email

DATE OF ORDER

(* Please delete as applicable)

Printing Service required *NORMAL / PRIORITY

Delivery Service required *STANDARD / EXPRESS

Please supply draw tickets in books of

Please state number of TICKETS not books

With Advert *YES/NO If Yes *ON FRONT/ON BACK of ticket

I enclose a cheque made payable to

RAPID PRINT for £

Signed

Please send your completed order and payment to:- **RAPID PRINT,
2 BRIDGE TERRACE, EAST STREET, SUDBURY, SUFFOLK CO10 2TT
Tel/Fax : 01787 379745**

Details required for Draw Tickets

Name of Organisation

Title of Draw

Prizes 1st:

2nd:

3rd:

Date, Place and Time of Draw

.....

Cash & Counterfoils returned by

Promoter's Name and Address

.....

Price of Tickets (i.e. 20p)

Licensed in accordance with the Gambling Act 2005 with
(Please state name of Local Authority)

.....

Registered Charity No (If applicable)

Logo Required

Please state name of logo (see brochure) or supply your own.

Additional Information/Comments

Please complete order form instead of enclosing previous tickets to avoid confusion when processing order and to eliminate errors.