



Elphin GAA Lotto Jackpot Claim Form

Please complete in block capitals

First Name _____ Last Name _____

Address _____

Phone Number _____

Draw Date _____

Numbers Drawn _____

Please attach proof of ID and/or address

A scan/photocopy/clear photograph of Drivers License, Utility Bill etc. will be acceptable.

Completed forms can be returned to treasurer.elphin.roscommon@gaa.ie or in-person, by arrangement