



TICKET APPLICATION

Mr. Mrs. Miss Ms.

First Name _____ Last Name _____

Address _____

Apt.# _____ City _____

Province **ONTARIO** _____ Postal Code _____

Phone [home#] _____ [bus.#] _____

E-mail _____

Where did you hear about this lottery? (check only one)

- Community Friend/Family Rotarian Newspaper
 Radio Mail Internet Purchase Every Year

Please send me _____ tickets at \$100 each

Please send me * _____ bonus pack(s) of 3 tickets for \$250 per pack

*All 3-Pack ticket purchases must have the same name and mailing information on each ticket. 3-Pack tickets can only be mailed to the address of the ticket holder. Ticket purchasers/contestants must be at least 18 years of age. Only Ontario residents are eligible to win a prize.

Please make cheques payable to **Rotary Club of Guelph 2010 Dream Home.**

Method of payment

- Debit Cash Cheque
 Visa MasterCard Money Order

MasterCard/Visa # _____ Exp. _____

Signature _____

Ticket Seller _____

Organization _____

Send this completed form with payment to:

Rotary Club of Guelph Dream Home Lottery P.O. Box 511, Guelph, ON N1H 6K9.
Or fax this completed form with credit card number and expiry date to: 1-877-511-6406

Event Code:

By filling out this application, I consent to the use of my personal information for the purpose of future promotions for this contest. I agree to allow Rotary Club of Guelph Rotary Dream Home Lottery to notify me of future promotions and contests. All tickets will be mailed to contestants after application is processed. Rotary Club of Guelph, Ontario Lottery Licence No. 2640.

WEBSITE