



**ORDER ONLINE**

Provide the same information as requested on this form by visiting:

[www.UnifiedRaffle.com](http://www.UnifiedRaffle.com)



**ORDER BY MAIL**

Complete and return this form to:

Special Olympics Colorado Raffle  
12450 E Arapahoe Rd Suite C,  
Centennial, CO 80112

RAFFLE TICKETS	QTY.	TOTAL
SINGLE TICKET .....	\$10 EA. _____	\$ _____
5-PACK TICKETS .....	\$25 EA. _____	\$ _____
15-PACK TICKETS .....	\$50 EA. _____	\$ _____
<b>TOTAL ORDER AMOUNT: \$</b> _____		
<b>PROMO CODE</b> (Optional): _____		

Please print legibly so we may process your order without delay.

NAME TO APPEAR ON TICKET(S): \_\_\_\_\_

MAILING ADDRESS FOR TICKET(S): \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

- CHECK ENCLOSED PAYABLE TO **SPECIAL OLYMPICS COLORADO**
- VISA       MASTERCARD       DISCOVER       AMERICAN EXPRESS

CREDIT CARD NUMBER: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_ SECURITY CODE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

NAME ON CREDIT CARD: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOW DID YOU HEAR ABOUT THE RAFFLE? \_\_\_\_\_