

Dream House Raffle Entry Form

ENTER BY PHONE

You may order by phone, providing the same information as requested on this form by calling toll free:

1-888-433-0331

ENTER BY MAIL OR FAX

Complete & return this form to:
RMHCSD Dream House Raffle
2929 Children's Way, San Diego, CA 92123

Or fax to: **1-619-456-0018**

Please print legibly so we may process your order without delay

Number of Tickets: _____ x \$150 per ticket = **Total Amount:** \$ _____

Check enclosed, payable to: **RMHCSD Raffle** Cash

OR, please charge my credit card (check one):

VISA MasterCard Discover American Express

Card Number: _____ Expiration Date: _____ Security Code*: _____

* Last three numbers on signature line on back of credit card, or four digits on the front of American Express, above the account number.

Signature: _____

Name On Credit Card: _____

Billing Address: _____ City: _____ State: _____ Zip: _____

Phone (include area code): _____ Email Address: _____

Name To Appear On Ticket: _____

Mailing Address For Ticket: _____

City: _____ State: _____ Zip: _____

Phone (include area code): _____ Email Address: _____

How did you hear about the raffle? _____

I was referred by the following friend (full name) _____

from (City, State) _____

All entries received OR POSTMARKED before the drawing deadline(s) will be entered into the associated drawing and all subsequent drawings whether or not your ticket stub has been mailed to you. Your numbered ticket receipt(s) will be mailed to you after your check or credit card is processed. Although it may take four weeks before you receive your receipt(s), the raffle ticket(s) with matching numbers will be placed in the official drum for the drawings. ALL SALES ARE FINAL. NO REFUNDS. Only 40,000 tickets will be sold. Must be 18 years or older to enter. Void where prohibited. Raffle subject to rules and regulations. © 2010 Ronald McDonald House Charities® of San Diego. All rights reserved.