2016 Schlarman Annual Spring Raffle Ticket Purchase Form

Primary Name (only one name	here)			
First Name		Last Name		
Address				
City		State		
Zip code		Ph	one <u>()</u>	
Sales Person Name (if applicab	le)			
SA Student last name (if applie	cable)			
Method of Payment: Check en note 4 sets of 4 numbers please	enter below:			
Charge Card Expiration Da				
Additional Buyers (please no ticket):				iyers on one
Ticket buyers may designate the ticket proceeds. Please c Schlarman Academy.				
Holy Family		St. Anthony	St. Isaac	
ногу гашпу	St. Mary	St. Anthony		

Please mail this form with your check or credit card information to:

Schlarman Academy Development Office Attention Raffle 2112 N. Vermilion St. Danville, IL 61832

Once your ticket has been processed you will receive a verification postcard confirming your purchase. Please allow 15 business days for your postcard to arrive.

Thank you for your continued support of the Schlarman Spring Raffle!