

Santa Rosa Sunrise Super Raffle

TICKET REQUEST FORM

NAME:

ADDRESS:

PHONE NO.:

EMAIL ADDRESS:

ROTARIAN CONTACT:

TEAM CAPTAIN (OPTIONAL):

NUMBER OF TICKETS (OPTIONAL):

TICKET NUMBER(S):

PAYMENT METHOD (Check, Cash; CC)

CREDIT CARD NUMBER:

CC EXPIRATION DATE:

CC SECURITY CODE:

CC Zip Code:

Billing Zip Code:

This information is needed to process a ticket request using a credit card. Information provided will be held in strict confidence. Please send the information to your Sunrise Rotary Contact, or email to Steve Herron at Sandlherron@comcast.net or phone (707)494-2096
THANK YOU!