



DRAWING TICKETS BY MAIL

**You need not be present to win!
All requests must be postmarked by August 8, 2011**

6 tickets - \$5 \$ _____
15 tickets - \$10 \$ _____
Additional \$10 packets # _____ = \$ _____

Please print-out, fill-in clearly, and mail to the address below. Include check or credit card information which will be processed securely. Call or e-mail with questions.

We will fill-in the tickets for you and enter them. If you are one of our winners, we will arrange for delivery of your winnings and winning ticket stubs. After our benefit, the winners and their numbers will be posted on our website at

www.projecttheatrefoundation.com

Thank you for your participation and for supporting Project Theatre Foundation. Good Luck!

CREDIT CARD INFORMATION

Method of Payment: Check ___ Visa ___ MC ___ AMOUNT \$ _____

Name on Card _____

Card # _____ Exp. Date (mm/yy) _____

Signature _____

3 Digit Security Code (on back of card) _____

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