THE BIG RED RAFFLE
Benefiting Special Olympics Wisconsin

Name ___________________________________________
Email ___________________________________________
Phone ___________________________________________

Agency/Athlete Name (if applicable) ____________________________

# of Tickets ___________________________________________

Must be a WI resident to win. By completing this coupon with payment, you hereby authorize Special Olympics Wisconsin to fill in your name, etc. onto your ticket(s) and drop in the raffle bin.

2 WAYS TO SUBMIT!

Tickets $5 each

1. By phone: Call (608) 442-5664
   Monday - Thursday 7am-3pm
   Visa & MasterCard accepted

2. By return coupon: Complete the form and return with your check payable to:
   Special Olympics Wisconsin at 2310 Crossroads Drive, Suite 1000, Madison, WI 53718.

You may pickup your raffle ticket stub at the address listed or we will email you a photocopy of your ticket(s).

License # R0020247-B-87882