



TINY HOUSE RAFFLE FORM

Name: _____

Address: _____

Phone: _____ Email: _____

Raffle Ticket: \$100 each | 3 for \$275 | 6 for \$525 | 10 for \$850

Check Credit Card | Amount Enclosed: _____

Credit Card Authorization

Card Type: _____

Card Number: _____ CVC# _____

Expiration: _____ Phone Number: _____

Billing Address: _____



Raffle Tickets will be mailed to the address provided on this form. Please note your mailing address on the top portion of the form and your billing address (if different) on the credit card portion of the form.

Any Questions please call Council on Aging at (707) 525-0143 or email- akutzer@councilonaging.com

**For raffle rules please see our website <http://councilonaging.com/tiny-house/raffle-rules/>*

*You can send this form to :
Council on Aging Raffle
30 Kawana Springs Rd
Santa Rosa, CA 95404*

Berryessa Model Tiny House by SunWest Tiny Homes