

# MILK RIVER KINSMEN CORVETTE RAFFLE 2023

## FOR INQUIRIES:

Call Toll Free: 1-888-379-0048

## ORDER ONLINE:

[www.milkriverkinsmen.ca](http://www.milkriverkinsmen.ca)

## TICKET REQUEST FORM

**TICKET BUYERS MUST BE 18 YEARS OR OLDER**

Lottery Licence 651308 | KINPOWER 50/50 Licence 651309

## MAIL TO:

Kinsmen Club of Milk River  
PO Box 263  
Milk River, AB  
T0K 1M0

### CORVETTE LOTTERY

\_\_\_\_\_ ticket(s) for \$25 each     \$ \_\_\_\_\_

\_\_\_\_\_ set(s) of 5 tickets for \$50     \$ \_\_\_\_\_

\_\_\_\_\_ set(s) of 25 tickets for \$75     \$ \_\_\_\_\_

\_\_\_\_\_ set(s) of 50 tickets for \$100     \$ \_\_\_\_\_

\_\_\_\_\_ set(s) of 100 tickets for \$150     \$ \_\_\_\_\_

### KINPOWER 50/50 LOTTERY

\_\_\_\_\_ ticket(s) for \$10 each     \$ \_\_\_\_\_

\_\_\_\_\_ set(s) of 5 tickets for \$25     \$ \_\_\_\_\_

\_\_\_\_\_ set(s) of 15 tickets for \$50     \$ \_\_\_\_\_

\_\_\_\_\_ set(s) of 30 tickets for \$75     \$ \_\_\_\_\_

TOTAL AMOUNT OF PAYMENT     \$ \_\_\_\_\_

PLEASE NOTE: Purchasers must be 18 years of age or older. For your protection please do not send cash with this order form. Prizes are non-transferable and must be accepted as awarded. No cash substitutes allowed. Final draw date February 9, 2024. Sales cut-off 11:59pm January 31, 2024. Prizes may not be exactly as shown. Tickets must be purchased or sold within Alberta. Milk River Kinsmen Corvette Lottery total tickets 231,200, KinPower 50/50 Lottery total tickets 144,375. Official ticket to follow, please allow 3-4 weeks.

For official rules and regulations visit [www.milkriverkinsmen.ca](http://www.milkriverkinsmen.ca).

Name \_\_\_\_\_

Address \_\_\_\_\_

City/Town \_\_\_\_\_

Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Alternate ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Email \_\_\_\_\_  Printed Tickets      E-Tickets

PAYMENT METHOD:      VISA      MasterCard      Money Order      Cheque

Please make cheques payable to  
Kinsmen Club of Milk River. No  
cash or post-dated cheques please.

Credit Card \_\_\_\_\_ . \_\_\_\_\_ . \_\_\_\_\_     Expiry Date \_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_\_ / \_\_\_\_\_  
M M Y Y

Cardholder Name \_\_\_\_\_ Signature \_\_\_\_\_