This form to be filled in by the organization holding the raffle

Mount Wachusett Community College
Student Activities
Raffle Form

Today’s Date__________________________

Name of organization______________________________________________ ______________________________________

Person Completing Form Name/Tel. No._________________________________________ __________________

Dates of Raffle________________________________________________________________________________________

Prizes to be given________________________________________________________________________________________

__________________________________________________________________________________

Number of tickets sold _______ Cost per ticket (i.e. 1.00 each) ___________ = $_______
Number of tickets sold _______ Cost per ticket (i.e. 3/ $2.00) ___________ = $_______
Number of tickets sold _______ Cost per ticket (i.e. 10/$5.00) ___________ = $_______

Total ticket sales = $_______

<table>
<thead>
<tr>
<th>Name and address of winners</th>
<th>Amount or value of prizes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Sales slips for prizes must be handed in to the Student Life Office.

Form Completed by: ________________________________ Date completed: ________________
Raffle Form Instructions and Procedures:

Complete first 5 items on the form:

- Today’s Date
- Name of Organization
- Name & Tel. No. of Person Completing form
- Raffle Date(s)
- Prizes to be awarded

Within a few days of the raffle drawing, the rest of the form must be completed and returned to the Student Life office:

- Number of Tickets sold and cost of each ticket.
- Name and address of winners
- Amount or value of prizes.