

OFFICIAL TICKET REQUEST 2024

Children's Hospital Lottery

- ___ ticket(s) at 1 ticket for \$100
- ___ set(s) of 5 tickets for \$200
- ___ set(s) of 10 tickets for \$300
- ___ set(s) of 25 tickets for \$500

Each ticket in a set must contain the same information. Lottery licence 683010.

KinWin 50 Lottery

- ___ ticket(s) at 1 ticket for \$10
- ___ set(s) of 10 tickets for \$25
- ___ set(s) of 25 tickets for \$50
- ___ set(s) of 50 tickets for \$75
- ___ set(s) of 100 tickets for \$100

Each ticket in a set must contain the same information. Lottery licence 683011.

Cash Calendar Lottery

- ___ ticket(s) at 1 ticket for \$10
- ___ set(s) of 10 tickets for \$25
- ___ set(s) of 25 tickets for \$50
- ___ set(s) of 50 tickets for \$75
- ___ set(s) of 100 tickets for \$100

Each ticket in a set must contain the same information. Lottery licence 683013.

TOTAL AMOUNT OF PAYMENT \$ _____

Please make all cheques and money orders payable to: Children's Hospital Lottery 2024

NO POSTDATED CHEQUES PLEASE

Name _____
(LAST) (FIRST) (INITIAL)

Address _____

City/Town _____

Province _____ Postal Code _____

Phone - Day _____ Cell _____

Evening _____

Email _____



In the event all tickets have been sold when this ticket order form is received at the ticket sales centre, the purchaser will be sent an immediate notice and where applicable a refund of the ticket purchase amount.

FOR TICKET INQUIRIES

Please Phone 403-531-2273 or Toll-Free 1-888-531-2273

or Write Children's Hospital Lottery PO Box 2528 STN M, Calgary AB T2P 1A7

or Email: inquiries@childrenshospitallottery.ca

To receive your tickets, please select method of delivery:

E-ticket
Your E-TICKET(s) will be sent to the email address you provided within 24 hours.

Printed ticket
Your printed ticket will follow in approximately 2 - 3 weeks.



ORDER
ONLINE
HERE

