



2015 VACATION RAFFLE ORDER FORM

CONTACT — PLEASE PRINT CAREFULLY SO WE CAN CONTACT YOU

NAME _____

TELEPHONE _____

EMAIL _____

ADDRESS _____

CITY _____

STATE / ZIP _____

PAYMENT

PAYMENT MUST BE RECEIVED BY 9AM ~ APRIL 3, 2015

IF PAYING BY CHECK ~ Make payable to Heartwood

MAIL TO : Heartwood Theater Company

PO Box 1115 ~Damariscotta, ME 04543

OR DELIVER TO : Skidompha Library www.skidompha.org

~ During Regular Library Hours ~

PROPERTY SELECTION

Guest House ~ IRELAND	# tickets _____ @ \$50	Total \$ _____
Apartment ~ WASHINGTON DC	# tickets _____ @ \$50	Total \$ _____
Guest House ~ ITALY	# tickets _____ @ \$50	Total \$ _____
Condo ~ NEW YORK	# tickets _____ @ \$50	Total \$ _____
Chalet ~ FRANCE	# tickets _____ @ \$50	Total \$ _____
Bed & Breakfast ~ BOSTON	# tickets _____ @ \$25	Total \$ _____
TOTAL		\$ _____

___CHECK ___CREDIT CARD : # _____ - _____ - _____ EXP. ____/____