



Name: _____

Address: _____

Home Phone: _____ Cell: _____

Email: _____ (to send monthly email announcing winners)

The 2024/25 raffle begins with the first drawing on *May 1st, 2024*

I wish to purchase the following **Tuition Angel Raffle** tickets: Quantity _____ @ \$1,200 each = _____

If purchasing a portion of a ticket: Percentage of ticket _____ @ \$ _____

If available, I would like the following ticket number(s): _____

If ticket is being purchased as a family or group, please list names of other participants:

I would like to be a *Tuition Angel* and make a tax-deductible contribution of \$ _____ to provide additional tuition assistance to families who would not be able to attend St. Mary Cathedral School because of tuition costs.

PLEASE INDICATE YOUR DESIRED METHOD OF PAYMENT: *PAYMENT PROCESSED BY MAY 1st*

Please consider paying by check to help keep processing fees low! We pay between 2-4% for credit card processing fees.

Pay in Full (check) 12 equal payments (check-please invoice me) Pay in Full (Credit Card) 12 equal payments (Credit Card)

CREDIT/DEBIT CARD AUTHORIZATION

SELECT ONE: Visa MasterCard Discover American Express

Name as it appears on card (please print): _____

Card Number: _____ - _____ - _____ - _____ 3-digit Verify # _____ Exp. Date: _____ / _____

CHOOSE ONE: One-time payment of \$ _____
 Twelve equal payments of \$100 (per ticket)
Indicate monthly payment amount if different (for partial ticket) \$ _____
(credit card will be charged on the first of each month, regardless of day of the week)

Drawing Dates are: 2024: May 1st, June 3rd, July 1st, August 1st, September 2nd, October 1st, November 1st, December 2nd
2025: January 1st, February 3rd, March 3rd, and April 1st.

I hereby authorize St. Mary Cathedral School to charge my credit/debit card as noted below:

Signed: _____

Date: _____