

Riverton Ice Hockey Association

Raffle Ticket Form

NAME _____ NUMBER OF TICKETS _____

ADDRESS _____

PHONE NUMBER _____

EMAIL _____

Tickets are \$5 each, or 5 for \$20. Please make check to RIHA and mail with this form to:

RIHA
PO BOX 1075
RIVERTON WY 82501

An email will be sent when entries into drawing is confirmed.