

Member # (REQUIRED)	Member Name	Max 6 Tickets	Price	Total \$	Cash or Debit	Ticket Number(s)	Member Initials	Coordinator Initials
			12					
			12					
			12					
			12					
			12					
			12					
			12					
			12					

NOTE: AUPE Membership # is REQUIRED. Failure to provide a membership # will result in forfeit of ticket(s).