



Dream Big, WIN BIGGER

ORDER NOW. Please complete form below and mail or fax to:



MAIL:

London Health Sciences Foundation
c/o Dream Lottery
900-3100 Steeles Ave E
Markham, ON L3R 9Z9



FAX:

519-685-8492



DREAM IT. WIN IT. ORDER NOW.

Must be 18+ to order.

Name

Address

City ON, Postal Code.....

Phone (work)(home).....

(cell) Email.....

METHOD OF PAYMENT Cheque Payable to DREAM LOTTERY. Please, no post-dated cheques

Money Order

Signature

Card#

Expiry / Cardholder:



- (QTY) 2 Tickets for \$50 = \$.....
- (QTY) 8 Tickets for \$100 = \$.....
- (QTY) 22 Tickets for \$250 = \$.....
- (QTY) 50 Tickets for \$500 = \$.....



50/50 tickets must be ordered in conjunction with Dream Lottery tickets, minimum payout \$250,000

- DO NOT FILL OUT THIS AREA WITHOUT HAVING FILLED OUT DREAM LOTTERY TICKETS
- (QTY) 6 Tickets for \$20 = \$.....
 - (QTY) 20 Tickets for \$40 = \$.....
 - (QTY) 60 Tickets for \$60 = \$.....



Making a Difference Calendar tickets must be ordered in conjunction with Dream Lottery tickets

- DO NOT FILL OUT THIS AREA WITHOUT HAVING FILLED OUT DREAM LOTTERY TICKETS
- (QTY) 6 Tickets for \$20 = \$.....
 - (QTY) 20 Tickets for \$40 = \$.....
 - (QTY) 60 Tickets for \$60 = \$.....

TOTAL = \$.....

Official tickets will be provided by email within 7-10 business days
DLRAF1454603 50/50RAF1454604 CLRAF1454606

LIFE-SAVING IMPACT. LIFE-CHANGING PRIZES.

