

FOUR WAYS TO ORDER



HOSPITALS OF REGINA
FOUNDATION
HOME LOTTERYTM

EARLY BIRD DEADLINE:
MIDNIGHT APRIL 26

EARLY BIRD DRAW: MAY 7, 2019*

FINAL DEADLINE:
MIDNIGHT MAY 10

FINAL DRAW (if needed): MAY 21, 2019*



ONLINE:

hrfHomeLottery.com



PHONE:

306-347-3400 • 1-800-667-7760

2019 OFFICIAL TICKET REQUEST



MAIL:

Complete the Official Ticket Request and send it along with your cheque, money order, or VISA, MasterCard or American Express number.
Official ticket(s) will follow by mail. Tax receipts cannot be issued. Only 53,500 Home Lottery tickets will be sold.

PURCHASER INFORMATION

Mr. Mrs. Ms. Miss Dr.

First name _____ Last name _____

Mailing address _____

City/Town _____ Province SK Postal code _____ - _____

Phone: Work () _____ Home () _____ Cell () _____

Email _____

Check to receive text alerts (Standard mobile rates may apply.)

Age 18-24 25-34 35-49 50-64 65+ The provision of age information is optional and used only for internal marketing and statistical purposes.

Tickets must be purchased and mailed within Saskatchewan. Purchasers must be at least 18 years of age. The following, including their spouse and any related or dependent person residing in the same household, are prohibited from purchasing a ticket: the directors, executives and staff of Hospitals of Regina Foundation, board and executive teams of builders contracted to provide real estate prizes to this lottery and any contracted interior designers, partners and employees of Deloitte LLP and its affiliates. Hospitals of Regina Foundation respects your privacy. We do not rent, sell or trade our contact lists. Personal information collected will be used to fulfill ticket orders, provide information on our future lotteries, contact prize winners and publicize the names of prize winners. If you wish to be removed from our contact lists, please check here _____, or call 1-800-667-7760 or email reginalotterycs@deloitte.ca. The liability of the licensee of this lottery shall be limited to the purchase price of the ticket(s).

TICKET ORDER INFORMATION

Home Lottery Tickets

_____ single ticket(s) at \$100 each.
Total: \$ _____
_____ 3-pack(s)* at \$250 each.
Total: \$ _____
_____ 5-pack(s)* at \$375 each.
Total: \$ _____

50/50 Add-On[†]



_____ single(s) at \$10 each.
Total: \$ _____
_____ 5-pack(s)* at \$25 each.
Total: \$ _____
_____ 15-pack(s)* at \$50 each.
Total: \$ _____



100 Days of Winning[®] Cash Calendar[™] Add-On[†]

_____ single(s) at \$25 each.
Total: \$ _____
_____ 5-pack(s)* at \$50 each.
Total: \$ _____

**LIMITED
QUANTITIES**

**\$500
SUPER PACK(s)***

Includes **6** – Home Lottery tickets, **15** – 50/50 Add-On tickets and
5 – 100 Days of Winning Cash Calendar Add-On tickets TOTAL: _____

TOTAL ORDER AMOUNT:

(Home Lottery tickets, 50/50 Add-On tickets, 100 Days of Winning Cash Calendar Add-On tickets and Super Pack tickets)
\$ _____

METHOD OF PAYMENT (Check only one)

Cheque Money order MasterCard VISA AMEX

Make cheque or money order payable to: **Hospitals of Regina Foundation Home Lottery.**
Please, no post-dated cheques.

Mail to: Hospitals of Regina

Foundation Home Lottery

PO Box 5020, Regina SK S4P 3M3

Cardholder's name _____ Cardholder's signature _____

Card number: _____ . _____ . _____ . _____

Expiry date: _____ . _____
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Lottery licence #LR18-0086