

ID No.....



# 42nd Annual Community Raffle 2025-26

## RAFFLE APPLICATION FORM

**Participating Organisation:** Name: \_\_\_\_\_

**Address:** \_\_\_\_\_

Email: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

Address: \_\_\_\_\_ Postcode: \_\_\_\_\_

**Secretary:** Name: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

Address: \_\_\_\_\_ Postcode: \_\_\_\_\_

Number books of tickets (Tickets are stapled in books of 10): \_\_\_\_\_ Books Required

Bank Details:  
Bank Name: \_\_\_\_\_

BSB: \_\_\_\_\_ Account Number: \_\_\_\_\_

Bank information required for us to transfer funds to you for sales made.

**Will your organization be sending a representative to pick up your tickets in the foyer of Mingara Recreational Club between 12 noon and 2:00pm on the following weekends please tick one:-**

- Saturday 4<sup>th</sup> October
- Sunday 5<sup>th</sup> October
- Saturday 11<sup>th</sup> October
- Sunday 12<sup>th</sup> October

We, the participating organisation named above, acknowledge that we have undertaken to account for all tickets issued to us on this Form, which we will return to the holder of the Fundraising Authority (The Rotary Club of The Entrance, Inc.) on completion of this appeal.

Email this form back to [admin@rotarytheentrance.org.au](mailto:admin@rotarytheentrance.org.au)

**The Rotary Club of The Entrance Inc.**

**Helping our community**

Contact **Robin Hearder 0404 160 548** email [rhearder39@gmail.com](mailto:rhearder39@gmail.com)

Fund Raising Authority No. CFN 14370