



## Havasu Community Health Foundation

2126 McCulloch Blvd N Suite 14

Lake Havasu City, AZ 86403

Phone 928 453-8190 Fax: 928 453-8236

Confirmation Code: \_\_\_\_\_

### Ticket Form

For cash and check sales ONLY. If paying by credit card use the REGISTER NOW link location below the event flyer.

<https://havasucommunityhealthfoundation.org/events>

Business: \_\_\_\_\_

Individual(s): \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

*Email confirmation will be sent as soon as it is submitted*

Program: \_\_\_\_\_

Event: \_\_\_\_\_

Multiple Registrant ☐ # of \_\_\_\_\_

Registrant	Contributions	Number of	Amount
Adult (18 and over)	Tickets		
Student (6-17)	Cannot Attend – Contribution		
Preschool			
Breast Cancer Survivor			
Group Walk			

  

Tickets	Contribution	Grand Total
\$	\$	\$

Notes: \_\_\_\_\_

Payment Method ☐ CASH ☐ CHECK ☐ CREDIT ☐ SPLIT ☐ OTHER Check No. \_\_\_\_\_

\_\_\_\_\_  
HCHF Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
HCHF Representative

\_\_\_\_\_  
Date

Havasu Community Health Foundation is a 501(c)(3) public charity serving health-related needs and social services in the Lake Havasu community.

Our taxpayer identification number is 20-1839858, AZ Tax Credit: QCO 21974

90 cents of every dollar donated supports your charitable program of choice.