

3rd LAI-LAR Wolfpack Association Trophy Buck Fundraiser Ticket Request Form

TOTAL STATE OF THE	W W

Name:							
Address:							
City, State,	Zip:						
Phone #:							
Email Address:	•						
Tickets:		X \$50.00 each =	\$				
Please complete the form and write checks to 3 rd LAI-LAR Wolfpack Association, 321 E. California Street – Box 483, Gainesville, Texas 76241							
Card Payment Information							
Name:		Phone:					
Address:				Amount:			
City, State,	Zip:						
Check One:		Master Card	1	Visa		Check	
		Amex		Discover		Enclosed	
Credit Card	l #		I	Expires:			
Signature:			Security Code				