



# RAFFLES & GAMES OF CHANCE REQUEST FORM

Game of Chance Requested:	(circle one) RAFFLE BINGO OTHER: _____
Date of Request:	
Parish, School or Program:	
Contact Name:	
Contact Phone Number:	
Contact Email:	
Brief Description of Raffle or Game of Chance:	
Date of Raffle or Game of Chance:	
List of materials used to promote (physical and electronic):	
Do you have a webpage for the raffle or game of chance? If so, what is it?	

**Important:** This request form should be submitted via email to [kblanco@theadom.org](mailto:kblanco@theadom.org) along with all draft raffle or games of chance materials (tickets, flyers, webpage, etc.) for review. All materials must be reviewed and approved before dissemination.

Archdiocese of Miami Development Corporation  
9401 Biscayne Boulevard · Miami Shores, Florida · 33138  
(305) 762-1053 · [kblanco@theadom.org](mailto:kblanco@theadom.org)