## **SWEEPSTAKES ENTRY FORM**

First Name:	Last Name:
Street Address:	
City/Town:	
US State:	Zip/Postal:
Email Address:	
Phone Number:	
How you heard about this sweepstakes:	
Why you chose to enter via mail rather than make a donation:	
By providing your phone number and email address, you consent to being called, emailed, and/or receiving text messages.	
[] Check this box if the number above is a mobile number	
[] By checking this box I certify that I have met all eligibility requirements to enter, including being the age of majority in my state/province of residence, and I have read and agree to the Official Rules.	
[] I acknowledge that I will receive occasional updates, special offers, and other information from the Sponsor and/or the partners of the Sponsor.	
Print, complete, and mail to:	
LFLL	