## Canadian Helen Keller Cent

## TICKET ORDER FORM & SPONSOR INFORMATION REQUEST

| Are.                                     | Please use this form to order tickets and t                     | o check below if you wish to receive | e more information |
|--|---|--------------------------------------|--------------------|
| TIET                                     | Corporate Sponsorship - See Sponsors                            | ship Sheet                           |                    |
| entre canadien Helen Keller              | ☐ Diamond Event Sponsor - \$20,000                              | ☐ Gold Event Sponsor - \$15,00       | 00                 |
|  | ☐ Silver Event Sponsor - \$10,000                               | ☐ Bronze Event Sponsor - \$5,0       | 00                 |
| 14 <sup>th</sup> Annual                  | Tables for 10   |                                      |                    |
| Award Luncheon                           | ☐ Gold Table: Premium Seating and ½                             | Page AD in WhyNot Magazine           | \$4500             |
| Friday, April 27, 2018                   | ☐ Silver Table: Premium Seating and <sup>1</sup> / <sub>2</sub> | 4 Page AD in WhyNot Magazine         | \$4000             |
|  | ☐ Bronze Table: Premium Seating                                 |                                      | \$3500             |
|  | ☐ Corporate Table   |                                      | \$3000             |
| Honouring                                |   |                                      |                    |
| Royal Ontario                            | Single Tickets / Donations                                      |                                      |                    |
| Museum                                   | ☐ Number of tickets requested at \$300                          | per person tickets x \$300           | ) = \$             |
|  | ☐ Donation of \$  | · · · ———                            | ·                  |
|  | <del> </del>  |                                      |                    |
| Creat Charles                            | Personal Information (Tax Receipts wil                          | l be issued)                         |                    |
| Guest Speaker                            |   |                                      |                    |
| Jim Sanders                              | Name  |                                      |                    |
| Former CEO, CNIB Former CHKC Award Title |   |                                      |                    |
| Recipient                                | Title   |                                      |                    |
| [cfpdp]                                  | Company   |                                      |                    |
|  |   |                                      |                    |
|  | Full Mailing Address  |                                      |                    |
|  | City / Town   | Province                             | Postal Code        |
|  | Daytime Telephone Number  |                                      |                    |
|  | Email Address   |                                      |                    |
|  | Payment Information   |                                      |                    |
|  | 1 ayment information  |                                      |                    |
|  | ☐ Please invoice me   |                                      |                    |
|  | Please make cheque payable to "CFPDP                            | - CHKC"                              |                    |
| Canadian Foundation                      | Credit Card (please check one) □ V                              | isa □ Mastercard □ Amex              |                    |
| For Physically                           | credit card (prease effects one)                                | isa 🗀 Wastercard 🗀 Amex              |                    |
| Disabled Persons 6 Garamond Court        | Card Number   |                                      |                    |
| Suite 265                                | Card Number   |                                      |                    |
| Toronto, Ontario                         | Expiry Date   |                                      |                    |
| M3C 1Z5                                  | N 4 C 1   |                                      |                    |
| www.cfpdp.com                            | Name on the Card  |                                      |                    |
|  | Signature   |                                      |                    |





Phone: 416-760-7351