

# PARTNERSHIP & TICKET FORM

Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

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

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

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

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

## Partnership

Presenting at	\$15,000	<input type="checkbox"/>		
Hope at	\$10,000	<input type="checkbox"/>	Empower at	\$10,000 <input type="checkbox"/>
Courage at	\$5,000	<input type="checkbox"/>	Compassion at	\$5,000 <input type="checkbox"/>
Strength at	\$5,000	<input type="checkbox"/>	Inspire at	\$5,000 <input type="checkbox"/>
Family at	\$2,500	<input type="checkbox"/>		
Community at	\$1,000	<input type="checkbox"/>		

## Table/Tickets

Table of 8                      \$1,400                      No. of Tables: \_\_\_\_\_ at \$1,400 = \$ \_\_\_\_\_

Individual Tickets                      \$195                      No. of Tickets: \_\_\_\_\_ at \$195 = \$ \_\_\_\_\_

## Donation:

In lieu of tickets, I would like to donate:                      \$ \_\_\_\_\_

Total:                      \$ \_\_\_\_\_

Auction Item – Please contact me                     

Payment is enclosed in the form of:

Cheque attached or Credit Card                       VISA                       MC

Name on Card: \_\_\_\_\_

Card No: \_\_\_\_\_

Expiry Date: \_\_\_\_\_

WIN House

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(780) 471-6709

[www.winhouse.org](http://www.winhouse.org)

Charitable Registration No: 107283301 RR0001