



April 26, 2008

CFIS 8th Annual Fundraising Gala

Please complete this form in its entirety and mail, fax or deliver to the address at the bottom of the page. If you have any questions or comments, we may be contacted at 240-1500 ext 333 or by email at gala@cfis.com.

Ticket Order Form		
Name _____	Company _____	
Address _____	Postal Code _____	
E-mail _____	Daytime Phone _____	
TICKETS		
TICKETS	Qty: Ticket(s) at \$140 each	<u>Amount</u> \$
	Table (s) for 8 people at \$1000 each	\$
CASH DONATION	<input type="checkbox"/> I would like to help by contributing the following cash donation	\$
	<input type="checkbox"/> I would like to receive a tax receipt (complete section below)	
	<i>(All items above are GST exempt)</i>	TOTAL \$
TAX RECEIPT (CASH DONATIONS OVER \$25)	Made out to: _____	
	Address: _____ (leave blank if same as above)	
PAYMENT		
<input type="checkbox"/>	Cheque, made payable to: CFIS Advancement Society 700 – 77 th Street SW Calgary, AB T3H 5R1	
<input type="checkbox"/>	Credit Card (VISA only) Name as it appears on the card _____	
	Card Number _____ Expiry _____	
	Signature _____	

Please mail, fax, or deliver this form to the address below:

700 – 77th Street SW Calgary AB Canada T3H 5R1 **Tel:** 403 240 1500 ext 333 **Fax:** 403 249 5899
gala@cfis.com www.cfis.com

Charitable Registration Number 88717 6618 RR 0001