



Tzedakah Chapter - At Our Table 2017

An Evening in Support of Women's Health Initiatives

Sponsorship Confirmation Form

Payment by Credit Card can be made online at tzedakahchapter.com.

Donor Name: _____

Contact Name: _____

Address: _____

City: _____ Province: _____ Postal code: _____

Phone #: _____ Email: _____

Name for Recognition Purposes: _____ Anonymous

PLEASE INDICATE YOUR CHOICE:

- | | |
|--|--|
| <input type="checkbox"/> Emerald - \$5,000 (incl. 4 tkts) | <input type="checkbox"/> Gold - \$1,000 (incl. 2 tkts) |
| <input type="checkbox"/> Ruby - \$3,600 (incl. 3 tkts) | <input type="checkbox"/> Bronze - \$500 (incl. 1 tkt) |
| <input type="checkbox"/> Diamond - \$2,500 (incl. 3 tkts) | <input type="checkbox"/> Pearl - \$360 |
| <input type="checkbox"/> Platinum - \$1,800 (incl. 3 tkts) | <input type="checkbox"/> Friend \$ _____ |

*Full tax receipts provided for unused tickets if notified at least 1 week before the event.
A Tax Receipt for the maximum allowable amount will be issued to all Sponsors and Donors after the event*

How many event ticket do you require? _____

Names of Guests: _____

PAYMENT METHOD: *Payment by Credit Card can be made online at tzedakahchapter.com.*

Amount: \$ _____ CHQ – Payable to Tzedakah Chapter of CHW AMEX VISA MC

Name on credit card: _____

Credit Card #: _____ Expiry Date: ____ / ____

Signature: _____ CVV #: _____

**If not paying on line, PLEASE enclose payment with completed form and mail to:
TZEDKAH CHAPTER, c/o Nancy Cohen, 107 MILDENHALL ROAD, TORONTO, M4N 3H4**

Thank-you!