



NATIONAL TEAMS AWARDS BANQUET AND FUNDRAISER

January 24th, 2009

Renaissance Toronto Downtown (Rogers Centre)



REGISTRATION:

Name: _____ Phone: _____

Company: _____ Day Phone: _____

Address: _____ E-Mail: _____

_____ City: _____

Province/State: _____ Postal/Zip Code: _____

I would like to reserve _____ table settings (\$400 per setting)

I would like to reserve _____ table(s) with 8 settings per table (\$3200 per table)

I would like to reserve _____ table(s) with 10 settings per table (\$4000 per table)

Total amount to be paid: _____



GUESTS:

My guests will be: (additional names may be noted on a separate attachment)

Name: _____ Name: _____

Name: _____ Name: _____

Name: _____ Name: _____

Name: _____ Name: _____

Name: _____ Name: _____



I would like a tax receipt for my donation:

YES

☐

NO

☐

➡ Please fax this registration form along with your full credit card information or mail this form with a cheque payable to Baseball Canada to the following contact:

www.baseball.ca

Att: Greg Hamilton

Baseball Canada

Suite A7 - 2212 Gladwin Crescent

Ottawa, ON K1B 5N1

Tel.: (613) 748-5606 ext. 225 Fax: (613) 748-5767

E-Mail: ghamilton@baseball.ca